2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary of State DOCUMENT #412871 1. Entity Name 01-10-2006 90029 029 ***150.00 CENTRAL FLORIDA GLASS & MIRROR, INC. Principal Place of Business Mailing Address 1414 S HIGHLANDS AVENUE 1414 S HIGHLANDS AVENUE SEBRING, FL 33870 SEBRING, FL 33870 4441 US 27 South 3. Majling Address Suite, Apt. #, etc. 01062006 CR2E034 (11/05) 4. FEI Number Applied For EBRING 59-1423980 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent MADDOX, DONALD E. Street Address (P.O. Box Number is Not Acceptable) 9474 N HAMMOCK RD ZOLFO SPRINGS, FL 33890 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and accept the obligations of registered agent. 6-06 Ma SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Addition MADDOX, DONALD E NAME MARAE STREET ADDRESS 9474 N HAMMOCK RD STREET ADDRESS CITY-ST-ZIP ZOLFO SPRINGS, FL 33890 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE MADDOX, MARIA D STREET ADDRESS 9474 N HAMMOCK RD STREET ADDRESS CITY-ST-ZIP ZOLFO SPRINGS, FL 33890 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition PARNELL, VICKI L NAME NAME STREET ADDRESS 3629 PARNELL RD STREET ADDRESS CITY-ST-ZIP ZOLFO SPRINGS, FL 33890 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Jan 10, 2006 8:00 am

ATTACHMENT

6000122

412871

Central Florida Glass & Mirror Inc.

Central Florida Glass & Mirror Inc. 4441 US 27 South Sebring, Fl 33870

January 1, 2006

To Whom It May Concern,

We have moved into our new location. Please change our mailing address and ship to address. Both are the same.

New Address

Central Florida Glass & Mirror Inc. 4441 US 27 South Sebring, Fl 33870

Don and Mario Madde

863-385-8289 863-385-2340 Fax

Thank you,

Don and Maria Maddox