

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 417660

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: BOB'S GLASS AND RADIATOR SERVICE INC

**Current Principal Place of Business:**

11 W. STATE ROAD 84  
FT. LAUDERDALE, FL 33315 US

**New Principal Place of Business:**

**Current Mailing Address:**

11 W. STATE ROAD 84  
FT. LAUDERDALE, FL 33315 US

**New Mailing Address:**

FEI Number: 59-2214185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, ANNE MARIE  
7490 NW 12TH STREET  
PLANTATION, FL 33313 US

**Name and Address of New Registered Agent:**

DAVIS, ANNE MARIE  
7490 NW 12 STREET  
PLANTATION, FL 33313 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANNE M. DAVIS

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DAVIS, HOWARD M  
Address: 7490 NW 12 ST  
City-St-Zip: PLANTATION, FL 33313

Title: VST ( ) Delete  
Name: DAVIS, ANNE M  
Address: 7490 NW 12TH STREET  
City-St-Zip: PLANTATION, FL 33313

Title: ST ( ) Delete  
Name: DAVIS, ANNE M.,  
Address: 7490 NW 12TH STREET  
City-St-Zip: PLANTATION, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE M. DAVIS

VP

01/21/2009

Electronic Signature of Signing Officer or Director

Date