

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 22 AM 10:13

DOCUMENT # **554601** (5)

1. Corporation Name
DIAZ GLASS & MIRROR CORP.

Principal Place of Business Mailing Address
2211 SW 22 STREET MIAMI FL 33145

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/26/1977** 3a. Date of Last Report **03/11/1994**

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-1777207 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent DIAZ, JOSE 2611 SW 108TH AVE MIAMI FL 33165	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
---	--

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME DIAZ, JOSE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 2611 SW 108TH AVE	CITY-ST- ZIP MIAMI FL	1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST- ZIP	
TITLE D	NAME DIAZ, GUILLERMO	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 2611 SW 108TH AVE	CITY-ST- ZIP MIAMI FL	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST- ZIP	
TITLE	NAME	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		3.2 NAME	
CITY-ST- ZIP		3.3 STREET ADDRESS	
		3.4 CITY-ST- ZIP	
TITLE	NAME	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		4.2 NAME	
CITY-ST- ZIP		4.3 STREET ADDRESS	
		4.4 CITY-ST- ZIP	
TITLE	NAME	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		5.2 NAME	
CITY-ST- ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST- ZIP	
TITLE	NAME	6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS		6.2 NAME	
CITY-ST- ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jose Diaz* **JOSE DIAZ** PRESIDENT **02/13/95** (305) 856-6980
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Typed Name