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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 631866 1. Corporation Name A SERVICE GLASS & MIRROR, INC. Principal Place of Business Mairing Address 4141 N.E. 6TH AVENUE					
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number 59-2790804	Applied For Not Applicable
Suite, Apt #		Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Orly % State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes Yes	ntangible tax under s 199.032,
24	25	29	30	Florida Statutes Yes 10. Name and Address of New Ro	egistered Agent
	9. Name and Address of Curro	rent Registered Agent	81 Name	TO THE PARTY OF TH	
LEWIS DOCED L. ID			I - I	dress (P.O. Box Number is Not Acceptable	ie)
LEWIS, ROGER L JR 4141 NE 6TH AVE					
FORT LAUDERDALE FL 33334			\	83	
11. Pursuant to the provisions of Sections 607,0502 and			84 City		
	Signature, types or printed name of registers Let	openta intro Adoptiva in (N. AND DIRECTORS	The Registeric April Squalize result	ADDITIONS/CHANGES TO OFF	
12.	PD	DELETE	1. 1 TITLE		Change Addition
NAME	LEWIS, ROGER L JR		1.2 NAME		
STREET ADDRESS	4227 NE 6TH AVENUE		1.3 STREET ADDRESS		
CITY - ST - ZIP	FT. LAUDERDALE FL	DELETE	1.4 CHY - \$1 - ZIF 2.1 TITUE		Change Addition
TITLE			2 2 NAME		
NAME STREET ADDRESS			2.3 STREET ADDRESS		
STREET ADDRESS CITY+ST-ZIP			2.4 CITY - ST - 7IP		Change Addition
TITLE		☐ DELETE	3 1 TITLE		□ o m do □ viacation
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4 CITY - ST - ZF2		
CITY - ST - ZIP		☐ DFLEIE	4 1 TITLE		Change Addition
TITLE			4.2 NAME		
NAME STREET ADDRESS			4.3 STREET ADDRESS	APPR	OVED
CITY - ST - ZIP			4.4 CHY - S1 - ZiP		Cnaige Addition
TITLE		☐ DELETE	5 1 TITLE	MAX	1 1996 Cnalge Addition
NAMÉ			5 2 NAME	l Mai	W 1
STREE! ADDRESS	s		5 3 STREET ADDRESS	BY:	7.7
CITY - ST - ZIP	1	DELETE	5 4 CHY-ST-ZIP 6 1 TITUE	0000018	10784 Mage Addition
TITLE		□ DECEIG	6 2 NAME	-05/06/96U:	1007034
NAME			63 STREET ADDRESS	***200,00	
STREET ADDRESS	S 1		000		

64 CITY - ST-ZIP

14. I do heretly certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 certify 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 chapted, or on an attachment with an address. SIGNATURE: