FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 633267

(0)

GLASS-ART OF MARCO, INC.

FILED May 14 1998 8:00am Secretary of State

303			
Principal Place of Business	Mailing Address		T INDIVID BISING INTOS ISING TOURS AND ASING AND
G/O MR. ARNOLD LAWRENCE	C/O MR. ARNOLD LAWRENC	DE .	
RODARBOR LAKE DRIVE 307	300 ARBOR LAKE DRIVE		DO NOT WRITE IN THIS SPACE
NAPLES FL 33963	NAPLES FL 33963		3. Date Incorporated or Qualified
			08/21/1979
2. Principal Place of Business	2a. Mailing Address		4. FEI Number Applied For
21	26		59-1930975 Not Applicable
Suite, Apt. #, etc.	Suite, Apt #, etc.		SR 75 Additional
22	27		5. Certificate of Status Desired Fee Regulred
City & State	Cily & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25	29 30	<u> </u>	Personal Property Tax due June 30. Yes No
g, Name and Address of Current I	legistered Agent	04 1	10. Name and Address of New Registered Agent
V.A. PRAETE, PA A		81 Name	i
2375 TAMIAMI TRAIL NORTH		82 Street Add	dress (P.O. Box Number is Not Acceptable)
NAPLES FL 33941		83	
		63	
		B4 City	FL 85 Zip Code
11 Pursuant to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the above named co	rporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of	Florida Such change was auth	horized by the corpora	ation's board of directors. I hereby accept the appointment as registered
-	ons or, section 607.0505, 1 iono	a statutes.	
SIGNATURE Signature, typed or printed name of registered agent a	and title if applicable (NOTL: Br	egistered Agent signature requ	uired when reinstaing) DATE
12. OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE TD	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME SOF LAWRENCE, ARNOLD		1.2 NAME	
STREET ADDRESS 307 ARBOR LAKE DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP NAPLES FL		1.4 CITY-ST-ZIP	
TITLE PD	DELETE	2.1 TITLE	☐ Change ☐ Addition [C
NAME 303 LAWRENCE, IRMA S		2.2 NAME	
STREET ADDRESS CO ARBOR LAKE DR	4	2.3 STREET ADDRESS	
CITY-ST-ZIP NAPLES FL.		2. 4 CITY - ST - ZIP	
TITLE VS	☐ DELETE	3.1 TITLE	Change Addition
NAME LAWRENCE, ARNOLD		3.2 NAME	
STREET ADDRESS 307 ARBOR LAKE DRIVE		3.3 STREET ADDRESS	
ETY-ST-ZIP NAPLES FL	DELETE	3 4. C(TY - ST - Z)P	Change Addition
Tile	F" DEFEIG	4 1 TITLE	Change (Abbillion)
NAME OTDEST ADDRESS		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CHY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME	occur	5.2 NAME	C Stange C Abbridge
STREET ADDRESS		5.3 STREET ADDRESS	į
CITY-ST-ZIP		54 CITY-ST-ZIP	1
TITLE	DELETE	6.1 1ITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
WITT-WITEH		5.4 0011-01-21	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 attachingent with an address.

SIGNATURE: Pom a S James

APR 28 1998