

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

FILED

Mar 10 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 850196 (7)  
1. Corporation Name  
STAINED GLASS OVERLAY, INC.

Principal Place of Business  
1827 N CASE ST  
ORANGE CA 92665

Mailing Address  
1827 N CASE ST  
ORANGE CA 92665



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/31/1981	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 95-3805418	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 Zip Code

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 office 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PFÄHLER, REINHOLD	1.2 NAME	
STREET ADDRESS	2392 MORSE AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	IRVINE CA	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEA, PETER	2.2 NAME	PETER J. SHEA
STREET ADDRESS	2392 MORSE AVENUE	2.3 STREET ADDRESS	2392 MORSE AVE
CITY-ST-ZIP	IRVINE CA	2.4 CITY-ST-ZIP	IRVINE, CA 92714
TITLE	VTSD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POPE, SUSAN L.	3.2 NAME	SUSAN L. POPE
STREET ADDRESS	1827 N. CASE STREET	3.3 STREET ADDRESS	1827 N. CASE ST
CITY-ST-ZIP	ORANGE CA	3.4 CITY-ST-ZIP	ORANGE, CA 92665
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	SEC. - TREAS. DIRECTOR
STREET ADDRESS		4.3 STREET ADDRESS	PAUL W. CLEMENTS
CITY-ST-ZIP		4.4 CITY-ST-ZIP	5397 EGLINTON AVE. W.
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	DIRECTOR
STREET ADDRESS		5.3 STREET ADDRESS	STEVEN S. ROGERS
CITY-ST-ZIP		5.4 CITY-ST-ZIP	5397 EGLINTON AVE. W.
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	DIRECTOR
STREET ADDRESS		6.3 STREET ADDRESS	CHARLES E. CHASE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	1140 VALLEY FORGE RD

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 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:

*Susan L. Pope*

*Susan L. Pope*

*2/27/98 714974-1124*

CR2E034 (10/97)