FILED
Apr 18, 2003 8:00 am
Secretary of State
04-18-2003 90186 011 ***150.00

2003 FOR PROFIT CORPORATION / UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 850196

1. Entity Name
STAINED GLASS OVERLAY, INC.

Principal Place of Business	Mailing Address
1827 N CASE ST ORANGE, CA 92665	1827 N CASE ST ORANGE, CA 92665

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	c/o Ferrante & Associates Suite, Apt. #, etc. 126 Prospect Street
City & State	City & State Cambridge, MA
Zip / Country	Zip / Country 02139 / USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 95-3805418 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2526	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1st 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD POPE, SUSAN L 1827 N. CASE STREET ORANGE, CA 92665	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO Thomas W. Wood 4360 Chamblee Dunwoody Rd, Ste 410 Atlanta, GA 30341	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHASE, CHARLES E. 1140 VALLEY FORGE RD VALLEY FORGE, PA 19482	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROGERS, STEVEN S. 6397 EGLINTON AVE W ETOBICOKE, ONTARIO CANADA, M9C 5K6	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD CLEMENTS, PAUL W 6397 EGLINTON AVE W ETOBICOKE, ONTARIO CANADA, M9C 5K6	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CASSIDY, MICHAEL A 1827 N. CASE ST ORANGE, CA 92865	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Michael A. Cassidy 1827 North case Street Orange, CA 92865	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PClements Paul Clements Mar 28/03 416-620-9933
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #