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

PROFIT , GORPÔRATION ANNUAL REPORT



FLORIDA DEPARTMENT, OF STATE

Sandra B. Mórtham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9300004332 (3)

TEMPGLASS GROUP, INC.

Mailing Address

APPROVED PO FILED

1997 MAR 14 PM 2: 16

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place	of Business	Mailin	Mailing Address					Libration and shift and shift and said and said and shift and said				
14160 DALLAS PARKWAY. SUITE 850 DALLAS TX 75240			14160 DALLAS PARKWAY. SUITE 850 DALLAS TX 75240-7312									
								3. Date Incorporated or Qualified 09/24/1993	3a. Date of Last Report 09/13/1996			
2. Principal Pl	ace of Business	2a. Ma	iling Address					4. FEI Number			Applied For	
21		26	26					0,11,00.0			Not Applicable	
Suite, Apt.	#, etc.	—	Suite, Apt. #, etc.				_	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State					6. Election Campaign Financing		\$5.0	May Be	
23		28	28			Trust Fund Contribution			Added to Fees			
Zip	Country		Zip Co.					8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29		30					Florida Statutes Yes No				
	9. Name and Address of Currer		d Agent		-		_	10. Name and Address of New Re	gistered A	gent		
COR	PORATION SERVICE COMPANY	7			81	Nam	1e					
1201	I HAYS STREET		82 Street A			et Addre	ddress (P.O. Box Number is Not Acceptable)					
TALI	LAHASSEE FL 32301						_					
					83							
					84	City				85 Zi	ip Code	
						,			<u> FL</u>			
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1	1508, Florida Statu	ites, the a	bove	e-name	ed corporati	oration submits this statement for the p	urpose of at the adioc	changin@ ointmer t t	g its registered as registered	
agent, I a	egistered agent, or both, in the state m familiar with, and accept the oplig	ations of, Se	ection 607.0505, F	Iorida Sta	itujes) 	ion's board of directors. I hereby accep	2	\rightarrow	30	
SIGNATURE	De 1221	11/11	W1) \Lak	AT '	U	. $ au$			\mathcal{O}	10/	1'/	
SIGNATORE	Signature, typed or printed name of registered age				ed Age	ent signa	ture require	ed when reinstating)	DATE	DIDEOT	ODCINITO	
12.	OFFICERS AN	D DIRECTO		13.			_ _	ADDITIONS/CHANGES TO OFFIC	ERS AND	Chand		
TITLE	PD		L DELETE	1.1 T				9000021	1 = 0			
NAME	WITTSTOCK, JOHN	ITT 050			IAME		ļ	And the true the true the the			-	
STREET ADORESS	14160 DALLAS PARKWAY, SU	IIIE 850				ADDRES	S					
CITY-ST-ZIP	DALLAS TX 75240		C or cre		CITY-S	T-ZIP	-			Chang	e Addition	
TITLE	VPST		DELETE	2.1 1						Onang	ic	
NAME	QUICK, JERRY	ITTE 050			IAME		ł					
STREET ADDRESS	14160 DALLAS PARKWAY, SL	IIIE 850		2.3 5	TREET	ADORES	S			•		
CITY-ST-ZIP	DALLAS TX 75240		D 551 575	_		ST - ZIP				Chang	e Addition	
TITLE	AS		☐ DELETE		TITLE					Chang	le C Yourion	
NAME	HINES, MOLLIE	W 		- 1	VAME						}	
STREET ADDRESS	14160 DALLAS PARKWAY, SU	IIIE 850				ADDRES	is				Ì	
CITY-ST-ZIP	DALLAS TX 75240		1 Active			ST-ZIP				Chang	ie Addition	
TITLE	D COMMUNICATION AND A STATE OF THE STATE OF		DELETE		TITLE					∟ ∪nang	JO L. J Addition	
NAME	O'MAHONY, LIAM	TE ACA			NAME		1				ľ	
STREET ADDRESS	375 NORTHRIDGE ROAD, SUI	IE 350		4.3 5	STREET	ADDRES	S					
CITY - ST - ZIP	ATLANTA GA 30350			_	CITY-S	T-ZIP	_			Chang	e Addition	
TITLE	D		☐ DELETÉ		TITLE					L Chang	te Prominou	
NAME	LYNCH, MICHAEL				AME						.	
STREET ADDRESS	375 NORTHRIDGE ROAD, SUI	IE 350				ADDRES	S				_	
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TITLE			☐ DELETE		TITLE					Chang	Addition (
NAME				6.2	NAME					0	10.19	
STREET ADDRESS		_	~~~	6.3	STREET	ADDRES	is				5/W1 1	
CITY-ST-ZIP			1	640	CITY-S	T-ZIP		07/20/07	- 16 "		5"	
14. I do here	by certify that the information supplies	with this f	iling does not qua	lify for the	exe	emptio	n stated	in Section 119,07(3)(i), Florida Statute	s. I further	certify th	nav tne	

Information indicated on this annual report of 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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAI



ACCOUNT NO. : 072100000032

REFERENCE :

56389A

AUTHORIZATION

COST LIMIT :

\$ 165.00

292322

ORDER DATE: March 13, 1997

ORDER TIME: 9:55 AM

ORDER NO. : 292322-005

CUSTOMER NO: 56389A

CUSTOMER: Iris D. Trites, Corp Analyst

Hgp Industries, Inc.

Pacific Center, Suite 850

14160 Dallas Parkway Dallas, TX 75240

ANNUAL REPORT FILING

NAME:

TEMPGLASS GROUP, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: MIKE KLUNK!!

CHOLYBOARD AND HOUSING

CHOLYBOARD AND HOUSING

EXAMINER'S INITIALS:

28 : 11 MA 41 SAH TR HECEINED