


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006 8:00 am
Secretary of State

05-19-2006 90025 039 ***150.00

DOCUMENT # F94000002439 1. Entity Name GLASSWARE ACQUISITION INC.					
Principal Place of Business JUDEL PRODUCTS 45 KNOLLWOOD RD. ELMSFORD, NY 10523 US			Mailing Address 15 SYLVAN WAY PARSIPPANY, NY 07054		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 22-3192254	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	CD KOWALSKI, MICHAEL J 320 BROOKDALE ROAD KINNELON, NJ 07405 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Sharp, Karen 151 Riverwalk Way Clifton, NJ 07013 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORSEY, PATRICK B 170 COLLINGWOOD AVENUE FAIRFIELD, CT 06432 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Palomba, Tarz 10 Harvard Terrace West Orange, NJ 07052 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD FERNANDEZ, JAMES N 11 ROGERS COURT MIDLAND PARK, NJ 07432 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Controller Iglesia, Henry 438 Sussex Road Wood Ridge, NJ 07075 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD CONNOLLY, MICHAEL W 35 FORGE HILL RD GLEN GARDNER, NJ 08826 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HEADLEY, ROBERT B 2888 MEADOWCREST DR YORKTOWN HEIGHTS, NY 10598 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 5/12/06 Daytime Phone # 202-230-6320		

ATTACHMENT

TIFFANY & CO.
15 SYLVAN WAY
PARSIPPANY, NEW JERSEY 07054-3893
973-254-7000

April 26, 2006

40093215
F9400002439

Tiffany & Co.
600 Madison Avenue
New York, NY 10022

Re: Florida Annual Reports

Dear Naina:

Enclosed is the Florida Annual Report that need to be signed by an officer. I have enclosed check and certified mailer for the reports. After signed, the reports need to be mailed. If you could please make copies of the signed reports and send or fax them back to me.

I appreciate all of your help. If you have any question please do not hesitate to call. I can be reached at 973-254-7652. Our fax number is 973-254-8440.-

Best regards,



Ruth Ambrose
Sr. Tax Accountant

Enclosure