

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 21, 2000 8:00 am
Secretary of State

07-21-2000 90002 005 ***150.00

DOCUMENT # G79143

1. Entity Name

GULFSHORE GLASS AND MIRROR, INC.

R

Principal Place of Business

4636 ASHTON ROAD
 SARASOTA FL 34233

Mailing Address

4636 ASHTON ROAD
 SARASOTA FL 34233

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2431644

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BERDEAUX, DOUGLAS
161 WINDWARD DR.
OSPREY FL 34229

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	BERDEAUX, DOUGLAS A.	
STREET ADDRESS	161 WINDWARD DR.	
CITY-ST-ZIP	OSPREY FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERDEAUX, LILLIAN L.	
STREET ADDRESS	161 WINDWARD DR.	
CITY-ST-ZIP	OSPREY FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:

Douglas A. Berdeaux
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

07/11/00 (941) 922-8774

CR2E034 (5/00)

D#G79143
DW71234
Attachment

Gulfshore Glass & Mirror Inc.
4582 Ashton Rd.
Sarasota Fla. 34233
Ph./ Fx. (941) 922-8774

Fax Communication

Date: 7-11-00

Time:

Attention: to whom it may concern

Company:

Fax Number:

Project Name:

Re:

From:

No. of pgs. Incl. cover:

Comments:

Gulfshore Glass & Mirror Inc.
did not receive 1st notice of
Uniform Business Report. I do not
think the Inc. should absorb the
\$400 penalty because of this error.
Enclosed is \$150 for on-time filing.

Thank You - Lisa C. Scauff
CP

this letter written per Ruth's conversation
7/11/00 @ 1-850-488-9000