FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -9 PM 3:56

DOCUMENT # H51752 (4)

1. Corporation Name
PEACH GLASS & MIRROR INC.

Principal Place of Business	Mailing Address
% JIMMY PEACH ~~4537 W BURKE ST~~ ~~TAMPA FL 33614 5409~~	% JIMMY PEACH ~~4537 W BURKE ST~~ ~~TAMPA FL 33614 5409~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/11/1985
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 6750 Mary Lou Ln	26 6750 Mary Lou Lane
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Zephyrhills, Fl	28 City & State: Zephyrhills, Fl
24 Zip: 33544 25 Country	29 Zip: 33544 30 Country

4. FEI Number: 59-2521465 ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PEACH, JIMMY ~~4537 W BURKE ST~~ ~~TAMPA FL 33619~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 6750 Mary Lou Lane 83 84 City: Zephyrhills FL 85 Zip Code: 33544

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: Jimmy D Peach — March 5-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☐ Change ☐ Addition
NAME	PEACH, JIMMY	1.2 NAME	
STREET ADDRESS	~~4537 W BURKE ST~~	1.3 STREET ADDRESS	6750 Mary Lou Lane
CITY-ST-ZIP	~~TAMPA FL~~	1.4 CITY-ST-ZIP	Zephyrhills, Fl 33544
TITLE	ST	2.1 TITLE	☐ Change ☐ Addition
NAME	PEACH, PEGGY JO	2.2 NAME	
STREET ADDRESS	~~4537 W. BURKE ST.~~	2.3 STREET ADDRESS	6750 Mary Lou Lane
CITY-ST-ZIP	~~TAMPA FL~~	2.4 CITY-ST-ZIP	Zephyrhills, Fl 33544
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Jimmy D Peach — March 5-95 — 991-4926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0204034 CP