

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90066 043 ***150.00

DOCUMENT # H51752

1. Entity Name
PEACH GLASS & MIRROR INC.



Principal Place of Business
3212 N 40TH ST
UNIT 802
TAMPA, FL 33605-2310 US

Mailing Address
3212 N 40TH ST
UNIT 802
TAMPA, FL 33605-2310 US

24026404



2. Principal Place of Business
3212 N. 40th STREET

3. Mailing Address
3212 N. 40th STREET

Suite, Apt. #, etc.
UNIT 501

Suite, Apt. #, etc.
UNIT 501

03152004 Chg-P CR2E034 (10/03)

City & State
TAMPA, FL

City & State
TAMPA, FL

4. FEI Number
59-2521465

Applied For
Not Applicable

Zip
33605

Country
FLORIDA

Zip
33605

Country
FLORIDA

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

6. Name and Address of Current Registered Agent

DEPINTO, THOMAS P
5410 LINDBURG ST.
RIVERVIEW, FL 33567

7. Name and Address of New Registered Agent

Name **THOMAS P. DEPINTO**

Street Address (P.O. Box Number is Not Acceptable)
2610 PEGASUS CT.

BRANDON

FL Zip Code
33511

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3.15.09

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **DEPINTO, THOMAS**
STREET ADDRESS **5410 LINDBERG STREET**
CITY-ST-ZIP **RIVERVIEW, FL 33569**

TITLE **ST** ☐ Delete
NAME **DEPINTO, JILL A**
STREET ADDRESS **5410 LINDBURG ST**
CITY-ST-ZIP **RIVERVIEW, FL 33569**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **THOMAS DEPINTO**
STREET ADDRESS **2610 PEGASUS CT.**
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE **ST** ☒ Change ☐ Addition
NAME **JILL A. DEPINTO**
STREET ADDRESS **2610 PEGASUS CT.**
CITY-ST-ZIP **BRANDON, FL 33511**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **THOMAS DEPINTO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.15.09 (813) 917-9551
Date Daytime Phone #