

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J69553

FILED  
Apr 05, 2009  
Secretary of State

Entity Name: MEGA GLASS & MIRROR CORP.

## Current Principal Place of Business:

% FRANK DIJAK  
1501 YALE DR  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

## Current Mailing Address:

% FRANK DIJAK  
1501 YALE DR  
HOLLYWOOD, FL 33021

## New Mailing Address:

FEI Number: 59-2809975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DIJAK, FRANK  
1501 YALE DR  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DIJAK, FRANK  
Address: 1501 YALE ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP ( ) Delete  
Name: SCHULTZ, LYNN, KRISTIE  
Address: 1501 YALE ST  
City-St-Zip: HOLLYWOOD, FL 33021

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK DIJAK

PD

04/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date