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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J82981

(8)

EMERALD COAST GLASS AND MIRROR, INC.

Mailing Address Principal Place of Business 5123 GULF BREEZE PKWY 5123 GULF BREEZE PKWY **GULF BREEZE FL 32561** GULF BREEZE FL 32561

FILED Apr 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2827125 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible □ No Yes Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 WILLIAM G. CURTIS Name 1438 COLLEGE PKWY. 82 Street Address (P.O. Box Number is Not Acceptable) **GULF BREEZE FL 32561** 83 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE CURTIS. WILLIAM G. NAME 1.2 NAME CR2E034 1438 COLLEGE PKWY STREET ADDRESS 1.3 STREET ADDRESS **GULF BREEZE FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE **CURTISS, JAMES J** 2.2 NAME NAME 1430 TINA DRIVE., UNIT 11 STREET ADDRESS 2.3 STREET ADDRESS NAVARRE BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE **CURTISS, JAMES J** NAME 3.2 NAME 2041 NAVARRE PARK LN STREET ADDRESS 3.3 STREET ADDRESS NAVARRE FL CITY-ST-ZIP 3.4. CITY-ST-ZiP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. 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 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.