## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J83314

Entity Name: SOUTHEAST GLASS AND MIRROR, INC.

FILED Jul 19, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

603 US HWY 41 S RUSKIN, FL 33570 US

Current Mailing Address: New Mailing Address:

603 US HWY 41 S RUSKIN, FL 33570 US

FEI Number: 59-2835488 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SHERWOOD, THOMAS J. ESQ.
 GRAVES, RICHARD S

 701 U.S. 41 S.
 603 HWY 41 S

 RUSKIN, FL 33570
 US

 RUSKIN, FL 33570
 US

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: RICHARD S GRAVES 07/19/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Name: Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT ( ) Delete Title: PT (X) Change ( ) Addition Name: PITTS, JAMES R., PITTS, JAMES R.,

 Address:
 10614 COUNTY RD CR 672
 Address:
 603 HWY 41 S

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RUSKIN, FL 33570

Title: V ( ) Delete Title: V (X) Change ( ) Addition

 Name:
 GRAVES, RICHARD S.,
 Name:
 GRAVES, RICHARD S.,

 Address:
 217 - 6TH AVENUE, S.E.
 Address:
 313 WENDI LANE

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33570

Title: S () Delete Title: S (X) Change () Addition
Name: GRAVES, LORETTA Name: GRAVES, LORETTA

 Name:
 GRAVES, LORETTA
 Name:
 GRAVES, LORETTA

 Address:
 217 6TH AVE. SE
 Address:
 313 WENDI LANE

 City-St-Zip:
 RUSKIN, FL 33570
 City-St-Zip:
 RUSKIN, FL 33570

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 GRAVES, SYLVIA
 Name:

 607 7TH ST. SW
 Address:

 RUSKIN, FL 33570
 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: RICHARD S GRAVES V 07/19/2007