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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K15307

1. Corporation Name GLASSMASTERS CUSTOM GLASS & MIRROR, INC.

Principal Place of Business Mailing Address % ROBERT S. ALLYN, JR. 1402 PINE RIDGE ROAD NAPLES FL 33940-2939



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/11/1988
4. FEI Number 65-0030072 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 owes the current year Intangible Personal Property Tax. Yes No

2. Principal Place of Business 2a. Mailing Address
21 1475 Rail Head Blvd. 26 1475 Rail Head Blvd.
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.
23 City & State Naples, FL 28 City & State Naples, FL
24 Zip 34110 25 Country 29 Zip 34110 30 Country

9. Name and Address of Current Registered Agent

ALLYN, ROBERT S., JR. 1402 PINE RIDGE ROAD NAPLES FL 33942

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1475 Rail Head Blvd.
83
84 City Naples FL 85 Zip Code 34110

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE P ALLYN, ROBERT S., JR.
NAME ALLYN, ROBERT S., JR.
STREET ADDRESS 27189 GASPARILLA DR
CITY-ST-ZIP BONITA SPRINGS FL
TITLE V LEITER, KENNETH J.
NAME LEITER, KENNETH J.
STREET ADDRESS 5228 28TH PL S.W.
CITY-ST-ZIP NAPLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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, with all other like empowered.

SIGNATURE: Robert S. Allyn, Jr. 1/21/99 941-596-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/98)