## 514-98 B 7307 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State

**FILED** 

May 14 1998 8:00am

	GLASS BY JEAN, INC.	Mailing Address					
5617 N.W. 84TH TERRACE TAMARAC FL 33351-4304		5617 N.W. 84TH TERRAC	5617 N.W. 84TH TERRACE				
		TAMARAC FL 33321	-		DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualified	TIS SPACE	<del></del> -
					01/13/1989		
9 Principal P	lace of Business	2. Mailing Address	2s. Mailing Address			4. FEI Number Applied	
21		<u></u>	26		65-0092843	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			S8.75 Additional		
22		27	27		5. Certificate of Status Desired L.	Fee Re	
City & State	0	City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Countr	y	8. This corporation owes or has paid the		
24	25	[29]			Personal Property Tax due June 30. Yes No		
	9. Name and Address of Cu	rrent Hegistered Agent	81	I Name	10. Name and Address of New Negiste	Iou Agent	
	ITTNER, MARVIN, P.A.		Ľ				
	)1 N.W. 4TH ST.		82 Street Ad		fress (P.O. Box Number is Not Acceptable)		
	ITE 101		83	1			
100	ANTATION FL 33317		Ľ				
			. 84	4 City		FL 85 Zip (	Code
44 Pursuant	to the provisions of Sections 607	0502 and 607 1508. Florida Statu	tes the abov	ve-named cor	poration submits this statement for the purpo	se of changing its	s registered
office or r agent. I a	egistered agent, or both, in the S m familiar with, and accept the o	state of Florida. Such ch <b>ange w</b> as bligations of, Section 607,0505, F	authorized k Iorida Statute	by the corporates.	ation's board of directors. I hereby accept the	appointment as	registered
SIGNATURE	Signature, typical or printed haloc of respective	Annual and a state of the state	II - Designed A	cont riggature recu	pirod when reinstating) D/	ATE	
12.		AND DIRECTORS	13.	gish algebra e requ	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	PS DELETE		11 TITLE			Change	☐ Addition
NAME	ZIPPO, RITA JEAN		1 2 NAME				;
STREET ADDRESS	5191 N.W. 87TH TERRACI	E	1.3 STREET ADDRESS				
CITY-ST-ZIP	LAUDERHILL FL		1.4 CITY - ST - ZIP				
TITLE	10	☐ DELETE 2				Change	Addition G
NAME	<b>ZI</b> PPO, RITA JEAN		22 NAME	:			<b>\</b>
STREET ADDRESS	5191 NW 87TH TERRACE		2 3 STREE	F1 ADDRESS			
CITY-ST-ZIP	LAUDERHILL FL		2 4 City	- ST- ZIP			
TITLE		DELETE				☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-2IP			3.4. CITY			Chance	Addition
TITLE		☐ DELETE	4.1 TITLE	ì		L Change	Addition
NAME			4. 2 NAM			•	1
STREET ADDRESS				et address			
CITY-ST-ZIP	ZIP DELETE		4.4 CITY -			Change	Addition
TITLE			5.1 TITLE			L. Ottorige	/ NO/11011
NAME			5.2 NAME				
STREET ADDRESS			•	ET ADDRESS			
CITY-ST-ZIP	DELETE			5.4 CITY - ST - ZIP 6.1 TITLE		Change	Addition
TITLE							
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ET ADDRESS			
PATY_CT_7/P	ı		■ 641.IIY	1 31 OF			

14. Thereby certify that the information supplied with fais 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.

4.20-90 95V-721-211/3