


FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED  
Apr 08 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # K85569 (7) 1. Corporation Name THE GLASS PROFESSIONALS, INC.			
Principal Place of Business % DAVID A. LAPRADE 3560 SE DIXIE HWY STUART FL 34997-5245 US		Mailing Address % DAVID A. LAPRADE 3560 SE DIXIE HWY STUART FL 34997-5245 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country	
9. Name and Address of Current Registered Agent LAPRADE, DAVID A. 2481 SE WOOD AVE PT ST LUCIE FL 34952			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP LAPRADE, DAVID A. <input type="checkbox"/> DELETE	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAPRADE, DAVID A.	1.1 NAME	
STREET ADDRESS	2481 SE WOOD AVE	1.2 STREET ADDRESS	
CITY-ST-ZIP	PT ST LUCIE FL	1.3 CITY-ST-ZIP	
TITLE	DVT LAPRADE, WILLIAM K. <input type="checkbox"/> DELETE	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAPRADE, WILLIAM K.	2.1 NAME	
STREET ADDRESS	3560 SE DIXIE HWY	2.2 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	2.3 CITY-ST-ZIP	
TITLE	S STORRS, CHARLES <input type="checkbox"/> DELETE	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STORRS, CHARLES	3.1 NAME	
STREET ADDRESS	3560 SE DIXIE HWY	3.2 STREET ADDRESS	
CITY-ST-ZIP	STUART FL	3.3 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.1 NAME	
STREET ADDRESS		4.2 STREET ADDRESS	
CITY-ST-ZIP		4.3 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.1 NAME	
STREET ADDRESS		5.2 STREET ADDRESS	
CITY-ST-ZIP		5.3 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.1 NAME	
STREET ADDRESS		6.2 STREET ADDRESS	
CITY-ST-ZIP		6.3 CITY-ST-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/03/1989	
4. FEI Number 65-0124751	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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.

SIGNATURE: 

4-3-98 501-20-0455

CR2E034 (10/97)