

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K90516

(1)

1. Corporation Name

PRECISION AUTO GLASS, INC.



Principal Place of Business

% CARL KURTAGIC
1830 HYPOLUXO RD A-15
LANTANA FL 33462
US

Mailing Address

% CARL KURTAGIC
PO BOX 4066
BOYNTON BEACH FL 33424
US

2. Principal Place of Business

2a. Mailing Address

21 5280 10 AVE. N.

26 5280 10 AVE. N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Green Acres FL

28 Green Acres FL

Zip

Zip

Country

Country

24 33463

25 Palm Beach

29 33463

30 Palm Beach

9. Name and Address of Current Registered Agent

KURTAGIC, CARL
8051 ROSE MARIE CIRCLE
BOYNTON BEACH FL 33437

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 607.0802 and 607.1506, 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, hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0805, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	KURTAGIC, CARL	
STREET ADDRESS	8051 ROSE MARIE CIR	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	V	☐ DELETE
NAME	KURTAGIC, MICHAEL	
STREET ADDRESS	8051 ROSE MARIE CIR.	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not purport to be the exemption stated in Section 119.07(3)(k), 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: Carl Kurtagic CARL KURTAGIC
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96 407-965-5373
Date of Filing

CR2E034 (12/95)