

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000104863

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: A&G 24 HR EMERGENCY GLASS LLC

**Current Principal Place of Business:**

2301 N.E. 12 TERRACE  
POMPANO BEACH, FL 33064 US

**New Principal Place of Business:**

2511 10TH COURT  
POMPANO BEACH, FL 33062 US

**Current Mailing Address:**

2301 N.E. 12 TERRACE  
POMPANO BEACH, FL 33064 US

**New Mailing Address:**

2511 10TH COURT  
POMPANO BEACH, FL 33062 US

FEI Number: 26-3704563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 US

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

A AND G 24 HOUR EMERGENCY GLASS, LLC  
2511 NE 10TH COURT  
POMPANO BEACH, FL 33062 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: GARY A. BLOOM

04/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BLOOM, GARY A  
Address: 2301 N.E. 12 TERRACE  
City-St-Zip: POMPANO BEACH, FL 33064 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BLOOM, GARY A  
Address: 2511 NE 10TH COURT  
City-St-Zip: POMPANO BEACH, FL 33062 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GARY A. BLOOM

MGRM

04/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date