

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # L09702 (6)

1. Corporation Name

THE GLASS AND MIRROR HOUSE, INC.

Principal Place of Business

1438 10TH COURT
LAKE PARK FL 33403-2007

Mailing Address

1438 10TH COURT
LAKE PARK FL 33403-2007

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **08/16/1989** 3a. Date of Last Report **05/01/1994**

4. FEI Number **65-0132738** 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 has liability for intangible tax under S. 199.032. Florida Statutes Yes No

21. 2. Principal Place of Business
523 FORESTERIA DR.
Suite, Apt. #, etc.

26. Mailing Address
523 FORESTERIA DR.
Suite, Apt. #, etc.

22. City & State
LAKE PARK FL

27. City & State
LAKE PARK FL

24. Zip **33403** 25. Country **USA**

29. Zip **33403** 30. Country **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SCHWENCKE, KERRY R.
1645 PALM BEACH LAKES BLVD.
SUITE 290
W. PALM BEACH FL 33401**

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **OLIVEIRA, DENNIS**
STREET ADDRESS **1438 10TH COURT**
CITY-ST-ZIP **LAKE PARK FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS **523 FORESTERIA DR**
1.4 CITY-ST-ZIP **LAKE PARK FL 33403**

TITLE **V**
NAME **OLIVEIRA, DARYL**
STREET ADDRESS **1438 10TH COURT**
CITY-ST-ZIP **LAKE PARK FL**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS **523 FORESTERIA DR**
2.4 CITY-ST-ZIP **LAKE PARK FL 33403**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 107, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dennis Oliveira
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95

(407) 848-0076

DENNIS OLIVEIRA