

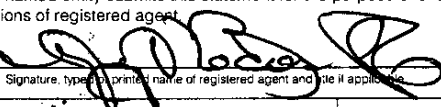
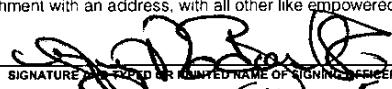


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90022 043 ***150.00

DOCUMENT # L69820 1. Entity Name GUYS GLASS & WINDOW, INC.					
Principal Place of Business 11459 61ST ST. N. PINELLAS PARK, FL 33782 US			Mailing Address 11459 61ST ST. N. PINELLAS PARK, FL 33782 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01192006 Chg-P CR2E034 (11/05)	
Zip Country		Zip Country		4. FEI Number 59-3008361	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BRODOSI, GUY F., JR 25378 HARWELL ST BROOKSVILLE, FL 34601			7. Name and Address of New Registered Agent Name BRODOSI, GUY F., JR. Street Address (P.O. Box Number is Not Acceptable) 11459 61 ST. N. City PINEHILL PARK FL Zip Code 33782		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		GUY F. BRODOSI, JR. PRES		1-23-06	
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		10. OFFICERS AND DIRECTORS			
TITLE D NAME BRODOSI, GUY F., JR STREET ADDRESS 25378 HARWELL ST CITY-ST-ZIP BROOKSVILLE, FL 34601		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE D/P NAME BRODOSI, GUY F., JR STREET ADDRESS 11459 61 ST. N. CITY-ST-ZIP PINEHILL PARK FL 33782			
CITY-ST-ZIP		CITY-ST-ZIP			
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CITY-ST-ZIP		CITY-ST-ZIP			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		PRESIDENT		1-23-06 7278714116	
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR GUY F. BRODOSI, JR		Date		Daytime Phone #	