## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M07549

 Entity Name MERKEL GLASS SERVICE, INC.



FILED
Jan 24, 2008 08:00 Al
Secretary of State

Principal Place of Business C/O DARYL R. MERKEL 555 N. RAILROAD AVE., BAY 8 BOYNTON BEACH, FL 33435 Mailing Address

C/O DARYL R. MERKEL 555 N. RAILROAD AVE., BAY 8 BOYNTON BEACH, FL 33435



01162008

No Chg-P

CR2E034 (11/05)

FEI Number
 59-2463513

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

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6. Name and Address of Current Registered Agent						•
MERKEL, DARYL R. 5555 N. RAILROAD AVE. BAY 8 BOYNTON BEACH, FL 33435				DO NOT WRITE IN THIS SPACE		
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 typed or printed name of registered agent and little if applicable (NOTE Registered in NOTE Regist				Agent signature required when reinstating)  OATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERKEL, DARYL R. 5555 N RAILROAD AV.BAY 8 BOYNTON BEACH, FL		<u>;</u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MERKEL, MARY J. 5555 N RAILROAD AV.BAY 8 BOYNTON BEACH, FL			• .		U00000793807 01/25/08-80023-016 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						9. Florida Statutas I further certify that the information

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 1.19. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-2008

Daytime Phone