

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M64270

FILED  
Feb 28, 2012  
Secretary of State

**Entity Name:** SCIENTIFIC GLASS OF FLA., INC.

**Current Principal Place of Business:**

201 NORTHSTAR COURT  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

201 NORTHSTAR COURT  
SANFORD, FL 32771 US

**New Mailing Address:**

**FEI Number:** 59-2891974

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HARSH, DEBRA L SECR.  
201 NORTHSTAR COURT  
SANFORD, FL 32771 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: HART, MELVIN G CEO  
Address: 545 WOODVIEW DR.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: PRES  
Name: HART, BRADY A PRES.  
Address: 2151 CANDLERIDGE COURT  
City-St-Zip: OVIEDO, FL 32765 US

Title: VP  
Name: HART, CARLA M V.P.  
Address: 545 WOODVIEW DR.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP  
Name: REYNOLDS, JAMES J V.P.  
Address: 1030 AARON DRIVE  
City-St-Zip: DELTONA, FL 32725 US

Title: SECR  
Name: HARSH, DEBRA L SECR  
Address: 112 SHEPHERD TRAIL  
City-St-Zip: LONGWOOD, FL 32750 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BRADY A HART

PRES

02/28/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date