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FILED
May 20 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N95000003387 (6)

1. Corporation Name

REFLECTIONS "N" GLASS CORVETTES, INC.



Principal Place of Business

Mailing Address

642 HYANNIE ST N.E.
PALM BAY FL 32907
US

P O BOX 500641
MALABAR FL 32950-0641

3. Date Incorporated or Qualified

07/17/1995

4. FEI Number

59-3217649

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 1213 Thallur Lane NW
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 Palm Bay
City & State

27 City & State

23 FL

28

24 32907 Zip

25 USA Country

29 Zip

30 Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCGOWAN, GEORGE
642 HYANNIE ST N.E.
PALM BAY FL 32907

81 Name

Jim Vines

82 Street Address (P.O. Box Number is Not Acceptable)

1213 Thallur Lane NW

83

84 City

Palm Bay

FL

85 Zip Code

32905

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MCGOWAN, GEORGE
STREET ADDRESS 642 HYANNIE ST N.E.
CITY-ST-ZIP PALM BAY FL

☒ DELETE

1.1 TITLE (PD)
1.2 NAME Jim Vines
1.3 STREET ADDRESS 1213 Thallur Lane NW
1.4 CITY-ST-ZIP Palm Bay FL 32907

☒ Change ☒ Addition

TITLE VD
NAME ALAZRAKI, MARTY
STREET ADDRESS 521 FERN AVE N.E.
CITY-ST-ZIP PALM BAY FL

☒ DELETE

2.1 TITLE Hal Weaver (VD)
2.2 NAME 243 Awin CR SE
2.3 STREET ADDRESS Palm Bay FL 32908
2.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE TD
NAME CONVERSE, ART
STREET ADDRESS 1585 FLAG DRIVE N.E.
CITY-ST-ZIP PALM BAY FL 32905

☒ DELETE

3.1 TITLE Zafar Aydinel (TD)
3.2 NAME 2570 Oklahoma St
3.3 STREET ADDRESS W. Melbourne, FL 32904
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE SD
NAME MCCONNELL, JOEY
STREET ADDRESS 1213 THALLUR LANE NW
CITY-ST-ZIP PALM BAY FL

☐ DELETE

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

☐ Change ☐ Addition

TITLE D
NAME GAFFNEY, DEBBIE
STREET ADDRESS 1183 CORDOVA ST S.E.
CITY-ST-ZIP PALM BAY FL

☒ DELETE

5.1 TITLE Lou Valez
5.2 NAME 3607 Eagle Nest Court
5.3 STREET ADDRESS W. Melbourne FL 32904
5.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE D
NAME GOLDSMITH, ROBERT W
STREET ADDRESS 180 SALMON DR N.E.
CITY-ST-ZIP PALM BAY FL

☒ DELETE

6.1 TITLE Roger Contreras (D)
6.2 NAME 3770 Corey Rd
6.3 STREET ADDRESS Malabar FL 32956
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

ZAFER AYDINEL 3/31/98 407-9514977

CR2E037 (10/97)