

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 19, 2005 08:00 AM
Secretary of State**

DOCUMENT # P00000108693



1. Entity Name
FASTGLAS, INC.

Principal Place of Business
**4226 SPRING GROVE RD
JACKSONVILLE, FL 32209**

Mailing Address
**4226 SPRING GROVE RD
JACKSONVILLE, FL 32209**



07182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3685679

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**THOMAS C PLEIMAN JR CPA
9471 BAYMEADOWS ROAD STE 308
JACKSONVILLE, FL 32256**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CRULL, GARY 216 IVY LAKES DR JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VM CRULL, DONNA 216 IVY LAKES DR JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/19/05-80001-010 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 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

G. Crull

7-18-05 904-765-2222