

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

05-01-2002 91465 009 ***150.00

DOCUMENT # P01000037005

1. Entity Name
THE GLASS CANVAS STUDIO, INC.

Principal Place of Business
 11128 TANGERINE BOULEVARD
 ROYAL PALM BEACH FL 33412

Mailing Address
 11128 TANGERINE BOULEVARD
 ROYAL PALM BEACH FL 33412

2. Principal Place of Business

3. Mailing Address
 319-B W. SAGAMORE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

319-B W. Sagamore

B

City & State

City & State
 CLEWISTON FL

Zip

Country

Zip

Country

33440

US

33440

U.S

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~NELSON, CINDY~~ CINDY EVANS
 11128 TANGERINE BOULEVARD
 ROYAL PALM BEACH FL 33412

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS NELSON, CINDY
CITY-ST-ZIP 11128 TANGERINE BOULEVARD
 ROYAL PALM BEACH FL 33412

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

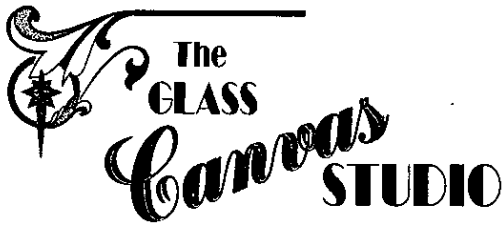
TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Cindy Evans*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-5-02 561-722-1091
 Date Daytime Phone #

CR2E034 (4/02)



Attachment

383/7

7-5-02

To Whom Concerned Attachment

#P01000037005

Enclosed is New address and
was recently married, my last name is
now "Evans."

I mailed in my report in April, and
Am including Canceled Check.

My accountant said report was in order
and to mail in \$150⁰⁰ by May 1st.

If there is any more information you
need please call. 571-722-1091 or Fax
863-805-2866

Thanking you in
Advance

Mary Evans.

Attachment

#001000037005

38317

©Circle American

THE GLASS CANVAS STUDIO		06-98	948442	2550
863-805-2866				
319-B W. SAGAMORE				
CLEWISTON, FL 33440				
Pay to the	Department of State	Date	4.16.03	63-27/631 FL 1491
Order of	McMurrick J & W			
	\$ 150			
	Dollars			
Bank of America				
ACH R/T 063100277				
For	65-1101263			
	1:063100277: 003660765290			
	2550			
	00000015000			
	MP			

GUARDIAN® SAFETY YELLOW DEYE

Attachment

#P01000037005

38317

US DATE 05/06/02
PAID C 659 OF

0506070532

BANK OF AMERICA NA JAX
10638000474 ESTD 01 PAID
05/06/02

MAY -6-02

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT.# 10090068796
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