

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078247

FILED
Apr 28, 2006
Secretary of State

Entity Name: ABSOLUTE AUTO GLASS, INC

Current Principal Place of Business:

318 TAMIAMI TRAIL, STE 12
PUNTA GORDA, FL 33950

New Principal Place of Business:

203 DRIFTWOOD LN
FORT MYERS BEACH, FL 33931

Current Mailing Address:

203 DRIFTWOOD LANE
FORT MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 65-1132852 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WUNDERLICH, PAULA J
203 DRIFTWOOD LANE
FORT MYERS BEACH, FL 33931 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WUNDERLICH, DAVID L
Address: 203 DRIFTWOOD LANE
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: S/T () Delete
Name: WUNDERLICH, PAULA J
Address: 203 DRIFTWOOD LANE
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAULA WUNDERLICH

S/T

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date