

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State

07-09-2004 90003 002 ***150.00

DOCUMENT # P01000085848



1. Entity Name
DADE-COUNTY GLASS & MIRROR CORPORATION

Principal Place of Business
**6745 SW 8TH AVE
MIAMI, FL 33144**

Mailing Address
**6745 SW 8TH AVE
MIAMI, FL 33144**

54060849



2. Principal Place of Business
6745 SW 8th St

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07032004 Chg-P CR2E034 (10/03)

City & State
Miami FL

City & State

4. FEI Number
65-1127368

Applied For
Not Applicable

Zip
33144

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

**BARO, ANGEL
6745 SW 8TH AVE
MIAMI, FL 33144**

7. Name and Address of New Registered Agent

Name
Angel Baro

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

6745 SW 8th St

City
Miami

FL

Zip Code
33144

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6/30/04

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
BARO, ANGEL
6745 SW 8 STREET
MIAMI, FL 33144** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

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.

6/30/04

Attachment

54060849

AFFIDAVIT WITH JURAT

Date: JUNE 30, 2004

RE: DOCUMENT # P01000085848

**State of Florida
County of Miami-Dade**

**The purpose of this letter is to acknowledge that I, Angel Baro,
President of DADE-COUNTY GLASS & MIRROR CORPORATION
located at 6745 SW 8 Avenue in Miami, Florida 33144, and properly
identified declare under oath declare that:**

**I mailed the Uniform Business Report with a check for \$150
which never cleared my bank. For this reason I ask that
you accept a duplicate check in the amount of \$150. If there
are any inquiries please contact my Accountant JANET
VASALLO at your convenience (305) 643-2482.**

X

Affiant's Signature

NOTARY PUBLIC

