

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114798

FILED
Apr 30, 2007
Secretary of State

Entity Name: PERUVIAN GLASS & MORE, INC.

Current Principal Place of Business:

3100 SW COLLEGE ROAD
SUITE 508
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

3100 SW COLLEGE ROAD
SUITE 508
OCALA, FL 34474

New Mailing Address:

8020 DEEPWOOD BLVD.
APT J 7
MENTOR, OH 44060

FEI Number: 54-2081730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANSON, VIVIEN L
2522 SW 27TH AVE.
OCALA, FL 34474 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: PTD () Delete
Name: SOTELO-PEREZ, SILVANA
Address: 3100 SW COLLEGE RD, SUITE 508
City-St-Zip: OCALA, FL 34474

Title: VPD () Delete
Name: MORALES, RICARDO
Address: 3100 SW COLLEGE ROAD, SUITE 508
City-St-Zip: OCALA, FL 34474

Title: SD (X) Delete
Name: MORALES, CLAUDIA
Address: 3100 SW COLLEGE ROAD, SUITE 508
City-St-Zip: OCALA, FL 34474

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: PEREZ, SILVANA
Address: 3100 SW COLLEGE RD, SUITE 508
City-St-Zip: OCALA, FL 34474

Title: VPD (X) Change () Addition
Name: MORALES, RICARDO
Address: 3100 SW COLLEGE RD, SUITE 508
City-St-Zip: OCALA, FL

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

I hereby certify that the information supplied with this filing does not qualify 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: SILVANA PEREZ

PTD

04/30/2007

Electronic Signature of Signing Officer or Director

Date