2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT FILED Feb 11, 2008 08:00 Al DOCUMENT # P03000003323 **Secretary of State** CAR GLASS INTERNATIONAL, INC. Principal Place of Business Mailing Address 8013 NW 66TH STREET 8013 NW 66TH STREET MIAMI, FL 33166 MIAMI, FL 33166 CR2E034 (11/05) 01072008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 27-0041905 Not Applicable 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROMERO, BLANCA Z DO NOT WRITE 8013 NW 66TH STREET MIAMI, FL 33166 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 DATE (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **PSTD** TITLE NAME CHEJIN, SAULO M STREET ADDRESS 8013 NW 66TH STREET CITY-ST-ZIF MIAMI, FL 33166 TITLE U000000823160 NAME 02/20/08-80024-021 158.75 STREET ADDRESS CITY-ST-ZIP TATLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trulk-on address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPE OR PRINTED VAME OF SIGNING OFFICER OR DIRECTOR

2/1/08

Daytime Phone #