2004 FOR PROFIT CORPORATION ANNUAL REPORT

متتبر		AITITUAL	REPORT							
1. Entity Nam	ė,	# P03000049 LUTIONS INC.	272				FICED METARY OF DN OF CORF DCT -4 PM		i;	
Principal Place of Business Mailing Address					<u> </u>	1 - ``	יטי א דר	1:23		•
110 S.W. 9TH AVENUE OKEECHOBEE, FL 34974 US			110 S.W. 9TH AVENUE OKEECHOBEE, FL 34974 US			# # ## ################################	CHINA SUN AUSU ANDU CH	16 ci na áis is ctil	L KANT ENDEN EN	PERFOR IL CILIN
2. Principal Place of Business 204 NE 9th Street			3. Mailing Address 204 NE 9th Street							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			09302004	Chg-P	CR2E03	4 (10/03)	
City & State Okeechobee, FL 34972			Okeechobee, FL 34972			4. FEI Numbe 13-4250	836		No	oplied For ot Applicable
Zip Country 34972 USA		Zip Countr 34972 USA		•		of Status Desired	F:	8.75 Add ee Require	ditional	
	- 6. Name	and Address of Current	Registered Agent							
KOŁODGY, JOHN C 110 S.W. 9TH AVENUE OKEECHOBEE, FL 34974						gy, John (P.O. Box Numbe E 16th Av	C . er is Not Acceptable nue	(e)		
					^{City} Okeecl	nobee		FL	Zig 2690	94
	named entit ions of regis		or the purpose of changing its	registere	ed office or registe	ered agent, or bot	h, in the State of Fl	orida. I am fa	miliar with,	and accept
SIGNATURE_	Signature, typed	or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature requin	ed when reinstating)		DATE		
		FEE IS \$150.00 otember 8, 2004	9. Election Campa Trust Fund Cont			5.00 May Be Ided to Fees	In accordance corporation did	with s. 607.1 not receive	93(2)(b), the prior	F.S., the notice.
10.	,	OFFICERS AND	DIRECTORS	11.	······································	ADDITIONS/	CHANGES TO OF	FICERS AND D	DIRECTOR	S IN 11
TITLE	DPT Delete					PVTSD				
NAME STREET ADDRESS CITY-ST-ZIP	KOLODGY, JOHN C 110 S.W. 9TH AVENUE OKEECHOBEE, FL 34974				ET ADIWIECC I	Kolodgy, John C. 301 SE 16th Avenue, Okeechobee, FL 3497				
TITLE NAME	DVS	TAMERA K	Delete	TITLE	- 1				Change	Addition
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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.										
SIGNATURE: COLOR PRINTED NAME OF PRINTED NAME										

Jofe

AUTO GLASS SOLUTIONS, INC.

204 NE 9th Street Okeechobee, Florida 34974

October 1, 2004

Division of Corporation PO Box 1500 Tallahassee, Florida 32302

RE: AUTO GLASS SOLUTIONS, INC.

Dear Sir/Madam:

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In furtherance of my telephone conversation with your office this afternoon, enclosed please find the necessary information to correctly file our company's annual report.

I am forwarding this letter as a request to waive any late charges that may be assessed as we did not receive any correspondence from you regarding filing an annual report, and we were unaware that we needed to do so as we are a new corporation.

It has been very difficult to operate our business and make sure that all necessary filing and paper work are done correctly and in a timely manner due to the horrible weather conditions our community has faced the last couple of months.

Should you require any additional information, or have any questions concerning the enclosed documents, please do not hesitate to contact me.

Your consideration in this matter is greatly appreciated.

With kindest regards

Sincerely,

John C. Kolodgy Auto Glass Solutions

John C. Kolodgy, President