## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 05, 2004 8:00 am Secretary of State 04-05-2004 90009 014 \*\*\*150.00

1. Entity Name VIDRIO CORP.					01 03 2001	20002 014 130	5.00
Principal Place 3730 SW 195 MIRAMAR, FL	5TH AVENUE	Mailing Address 3730 SW 195TH AVEN MIRAMAR, FL 33029	NUE			540263	137
2. Principal Pl	Re of Business LADES CIRCLE #, etc. 600	3. Mailing Address 9360 SUN Suite, Apt. #, etc.	SET DAII	03182004	Chg-P	CR2E034 (10/03)	
City & State	TON FLORINA	City & State	FLORINA	4. SELNumb	008033	<b>~</b>	plied For Applicable
3333	2 Country C4	Zip 33173	Country		of Status Desired	\$8.75 Add Fee Required	tional
	5. Name and Address of Current R BRADLEY JAY 95TH AVENUE FL 33029	egistered Agent	Name Strat Add	7. Name and TOHN Y these P O. FOR Number TE 3-8	Address of New Ri	<u></u>	
the poligati	named entry submits this statement for one of registered agent.  Agnature, pred or printed name of registered agent are  E NOWILL FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	nd trile if applicable. (NO	TE: Registered Agent signature	ICHOLS	th, in the State of Flo	FL   2335 irida.   am familiar with. 3/18/04 DATE	and accept
10.	OFFICERS AND E		11.	ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PSTD DENTON, BRADLEY JAY 3730 SW 195TH AVENUE MIRAMAR, FL 33029	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2600 G	LADES N. FLO	CIRCLE -	□ Addition #600 327
NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	□ ¥5dition
TITLE NAME STREET ADDRESS CITY - ST-ZIP	·	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP	od in Saetura 110 07/0	(i) Florida Statutes	Change	Addition

Thereby certify that the information supplied with this filling 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 suppliermental 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.