2006 FOR PROFIT CORPORATION

FILED Jul 10, 2006 08:00 AN Secretary of State

ANNUAL REPORT		
DOCUMENT # P03000115988 1. Entity Name A.A. GLASS SERVICE, INC.		
Principal Place of Business	Mailing Address	
2920 NINTH STREET NORTH ST PETERSBURG, FL 33704	2920 NINTH STREET NORTH ST PETERSBURG, FL 33704	

07052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 80-0079178 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOLDER, BRENDA J DO NOT WRITE 2920 NINTH STREET NORTH ST PETERSBURG, FL 33704 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 6, 2006 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS TITLE HOLDER, REGINALD E NAME STREET ADDRESS 2920 NINTH STREET NORTH 000000568931 07/11/06-80006-003 150.00 CITY-ST-7IP ST PETERSBURG, FL 33704 VP.S TITLE HOLDER, BRENDA J NAME STREET ADDRESS 2920 NINTH STREET NORTH ST PETERSBURG, FL 33704 CITY-ST-ZIP TITLE NAME HOLDER, BRENDA J STREET ADDRESS 2920 NINTH STREET NORTH DO NOT WRITE ST PETERSBURG, FL 33704 CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CiTY-ST-ZIP

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 with an address, with all other like empowered.

AME OF SIGNING OFFICER OR DIRECTOR