## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000050532

Entity Name: INTERGLASS CORP.

FILED Jan 30, 2009 Secretary of State

Littly Nan	ile. IIVI EN	GLAGS CORF.					
Current Principal Place of Business:				New Principal Place of Business:			
2175 W 8T HIALEAH,							
Current Mailing Address:				New Mailing Address:			
2175 W 8T HIALEAH,		US					
FEI Number:	20-1079783	FEI Number Applied I	For ( ) FEI Nur	mber Not Appli	icable ( )	Certificate of Stat	us Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							Agent:
JULIAO, HI 2175 W 8T HIALEAH, I	H CT.	US					
The above in the State		ty submits this statemer	nt for the purpose o	of changing it	ts registered off	ice or registered	d agent, or both,
SIGNATUR	RE:						
	Elect	ronic Signature of Regis	tered Agent			Date	
Election Can	npaign Finan	cing Trust Fund Contribution	on ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD JULIAO, HU 2175 W 8TH HIALEAH, F	HCT.		Title: Name: Address: City-St-Zip:	( ) (	Change ( ) Addition	n
Title: Name: Address: City-St-Zip:	VD RODRIGUE 2175 W 8TH HIALEAH, F	,		Title: Name: Address: City-St-Zip:	VD (X) (RAMOS, JAIRO 2175 W 8TH CT. HIALEAH, FL 33		n
Title: Name: Address: City-St-Zip:	SD CABELLO, 2175 W 8TH HIALEAH, F	HCT.		Title: Name: Address: City-St-Zip:	SD (X) 0 JULIAO, CARLO: 2175 W 8TH CT. HIALEAH, FL 33		n
Title:	TD	( ) Delete		Title:	( ) (	Change ( ) Addition	n

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HUMBERTO JULIAO PD 01/30/2009

INSIGNARES, ELIZABETH

2175 W 8TH CT.

HIALEAH, FL 33010

Name:

Address:

City-St-Zip: