

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 02, 2008 08:00 AM
Secretary of State**DOCUMENT # P05000073682**1. Entity Name
THE GLASS SHOP INC.

Principal Place of Business

**8040 TORRO COURT
ORLANDO, FL 32810**

Mailing Address

**8040 TORRO COURT
ORLANDO, FL 32810 US****DO NOT WRITE IN THIS SPACE**

04262008 No Chg-P CR2E034 (11/05)

4. FEI Number
90-0239644Applied For
Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**COVINO, JOSEPH A
8040 TORRO COURT
ORLANDO, FL 32810****DO NOT WRITE
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.

(NOTE: Registered Agent signature required when reappointed)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$500.00**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fee**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	COVINO, JOSEPH A
STREET ADDRESS	8040 TORRO COURT
CITY - ST - ZIP	ORLANDO, FL 32810
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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CITY - ST - ZIP	
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CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U000000944290
05/29/08-80091-022 150.00**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR

4-28-2008

Date

Define Phone #