

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000576

FILED
Aug 28, 2007
Secretary of State

Entity Name: ACCURATE AUTO & TRUCK GLASS, CORP.

Current Principal Place of Business:

858 NW 156 AVE
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

858 NW 156 AVE
PEMBROKE PINES, FL 33028 US

New Mailing Address:

FEI Number: 20-4066223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGAUL & STOLL, P.A.
8751 W. BROWARD BLVD
SUITE 404
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FAVILLO, CHARLES
Address: 858 NW 156TH AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: FAVILLO, BARBARA L MRS
Address: 858 NW 156 AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: SEC () Change (X) Addition
Name: FAVILLO, MADDIE S MISS
Address: 858 NW 156 AVE
City-St-Zip: PEMBROKE PINES, FL 33028 US

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.

SIGNATURE: BARBARA FAVILLO

DIR

08/28/2007

Electronic Signature of Signing Officer or Director

_____ Date