


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90139 040 ***150.00

DOCUMENT # P06000131683					
1. Entity Name TOMAHAWK GLASS INC					
Principal Place of Business 1348 UTAH BLVD ORLANDO, FL 32803			Mailing Address 1348 UTAH BLVD ORLANDO, FL 32803		
2. Principal Place of Business - No P.O. Box # 4146 Forsyth RD		3. Mailing Address 4146 Forsyth RD			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Winter Park FL		City & State Winter Park FL		4. FEI Number 20-5550351	
Zip 32792		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AVERY, ALLEN G 1348 UTAH BLVD ORLANDO, FL 32803			7. Name and Address of New Registered Agent Name: <u>Avery, Allen G.</u> Street Address (P.O. Box Number is Not Acceptable): <u>4146 Forsyth Rd.</u> City: <u>Winter Park</u> FL Zip Code <u>32752</u>		
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: <u>Allen Avery</u> <u>ALLEN AVERY President</u> <u>04/30/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME AVERY, ALLEN G STREET ADDRESS 1348 UTAH BLVD CITY-ST-ZIP ORLANDO, FL 32803	<input type="checkbox"/> Delete		TITLE P NAME Allen AVERY STREET ADDRESS 239 1/2 Oselthorpe Pl CITY-ST-ZIP Orlando FL 32804	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE CFO NAME AVERY, MARK STREET ADDRESS 1348 UTAH BLVD CITY-ST-ZIP ORLANDO, FL 32803	<input type="checkbox"/> Delete		TITLE CFO NAME MARK AVERY STREET ADDRESS 4146 Forsyth RD CITY-ST-ZIP WINTER PARK FL 32792	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Allen Avery</u> <u>ALLEN AVERY Pres.</u> <u>04/30/08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					