2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000047827

18916 BASCOMB LN

HUDSON, FL 34667

Address: City-St-Zip: FILED Jun 16, 2009 Secretary of State

Entity Name: GLASS DIMENSIONS INC. **Current Principal Place of Business: New Principal Place of Business:** 1080 COMMERCIAL WAY SPRINGHILL, FL 34609 **Current Mailing Address: New Mailing Address:** 1080 COMMERCIAL WAY SPRINGHILL, FL 34609 US FEI Number: 20-8870608 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SUDNIK, DANIEL FINGERMAN, VYACHESLAV 4119MARINER BLVD 4119 MARINER BLVD SPRING HILL, FL 34609 SPRING HILL, FL 34609 US US 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: VYACHESLAV FINGERMAN 06/16/2009 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SUDNIK, DANIEL Name: Name: 4119 MARINER BLVD Address: Address: City-St-Zip: SPRING HILL, FL 34609 US City-St-Zip: Title: D,VP () Delete Title: () Change () Addition Name: FINGERMAN, VYACHESLAV Name: 4119 MARINER BLVD Address: Address: SPRING HILL, FL 34609 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SUDNIK, DEBRA Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: VYACHESLAV FINGERMAN VP 06/16/2009