## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000008350

Entity Name: ALL - BEST AUTO GLASS CORPORATION

FILED Jan 17, 2012 Secretary of State

| Current Principal Place of Business:               |                                   | New Principal Place of             | New Principal Place of Business:          |  |
|--|-----------------------------------|------------------------------------|---|--|
| Current Principal Plac                             | e of Business:                    | New Principal Place of             | Business:                                 |  |
| 5303 NW 7 ST #R<br>MIAMI, FL 33126 US              | 5                                 |                                    |   |  |
| Current Mailing Address:                           |                                   | New Mailing Address:               | New Mailing Address:                      |  |
| 5303 NW 7 ST #R<br>MIAMI, FL 33126 US              | 3                                 |                                    |   |  |
| FEI Number: 26-2090805                             | FEI Number Applied For ( )        | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent:      |                                   | Name and Address of N              | Name and Address of New Registered Agent: |  |
| CORO, MABEL<br>5401 SW 5 ST<br>MIAMI, FL 33134 US  | 3                                 |                                    |   |  |
| The above named entity<br>in the State of Florida. | submits this statement for the pu | rpose of changing its registered o | office or registered agent, or both,      |  |
| SIGNATURE:   |                                   |                                    |   |  |
| Electro  | onic Signature of Registered Agen | t                                  | Date                                      |  |
|  |                                   |                                    |   |  |

## OFFICERS AND DIRECTORS:

Title: DF

 Name:
 CORO, MABEL

 Address:
 5303 NW 7 ST #R

 City-St-Zip:
 MIAMI, FL 33126 US

I hereby 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 all other like empowered.

SIGNATURE: MABEL CORO OWNE 01/17/2012