FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

FILED Sep 22 1997 8:00am

	199# 7	DIVISION DIVISIONI D	Secretary of State			
1. Corporatio	MENI# P93 n Name A GLASS OF TAMP	3000048945 (A BAY, INC.	(8)			
Principal Plac	e of Business	Mailing Address				
TARRON SPRI	NORTH #238 NOS FL 34689 Lake Rel # 70	40347 U.S. 19 NOI TARPON SPRINGS		1#ファ	do not write	IN THIS SPACE
lalm !	Austri 18 34	685 Polm H	achorife:	34665	3. Date Incorporated or Qualified 07/06/1993	3a. Date of Last Report 12/13/1994
· ·	lace of Business	2a. Mailing Addres	2a. Mailing Address		4. FEI Number 59-3191976	Applied For
Suite, Apt.	#, etc.	and the contract of the property of the contract of the contra	Suite, Apt. #, etc.			Not Applicable \$8.75 Additiona:
22		27	 		5. Certificate of Status Desired	Fee Required
City & Star	ė	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zφ	Count	try	8. This corporation has liability for	····
24	25	29	30		Florida Statutes Yes	
	9. Name and Address	s of Current Registered Agent		Name	10. Name and Address of New R	legistered Agent
MURACO	, JOSEPH		١	32 Street Ad	dress (P.O. Box Number is Not Acceptab	Vol.
	KE ROAD #70		L		oresa (r.o., box Number is Not Acceptat	
PALM HA	RBOR FL 34685		8	33		
			8	14 City		FL 85 Zip Code
11. Pursuant	to the provisions of Section	ns 607,0502 and 607,1508, Florida	Statutes, the above	e-named corp	poration submits this statement for the pur	pose of changing its registered office
or registe familiar w	red agent, or both, in the S ith, and accept the obligation	itate of Florida. Such change was au ons of, Section 607.0505, Florida St	uthorized by the co latutes.	rporation's bo	pard of directors. I hereby accept the app	ointment as registered agent. I am
SIGNATURE			man at the co		4. 3. 3. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4.	CANCEL CONTRACTOR OF THE CONTR
12.		ngelmed agent and title if applicable. FICERS AND DIRECTORS	(NOTE HOGISTA'00 A	geni signature requ	alred when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TITLE	PD		1 1 1)11	.F		Change Addition
NAME	MURACO, JOSEPH	30	12 NAM			
STREET ADDRESS CITY-ST-ZIP	334 E LAKE ROAD # PALM HARBOR FL 34		1.3 STREET ADDRESS 1.4 City-St-7iP			
TITLE	STD	TOOU	2 1 111L			Change Addition
NAME	MULLAN, KEVIN T		2.2 NAM	16.	•	
STREET ADDRESS	40347 U.S. 19 N., #2		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FI	L 34689		'-ST-ZIP		Channa Addition
TITLE NAME			3.1 HTL 3.2 NAM			Change Addition
STREET ADDRESS				ELT ADDRESS		
CITY-ST-ZIP			3.4 CITY	'-\$T-ZIP		
TITLE		The second secon	4.1 TITL			Change Addition
NAME			4.2 NAN			
STREET ADDRESS CITY-ST-ZIP				EFT ADORESS (- \$T- ZIP		
TITLE			5 1 TITL			Change Addition
NAME			5.2 NAN	1E		16. 10
STREET ADDRESS			5.3 STR	EE1 ADDRESS		\(\)^\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-ST-ZIP TITLE			5.4 C(1) 6.1 T(1)	r - \$T - ZIP		Change Addition
NAME			6.1 IIIL 6.2 NAN	i	90000229	
STREET ADDRESS				EET ADDRESS	-09/22/97010	32035
CITY-ST-ZIP			6.4 CITY	r-ST-7IP	***550.00	
14. I do here certify the	by certify that the informatic at the information indicated	on supplied with this filing is voluntar on this annual report or supplement	ily furnished and d Ial annual report is	oes not qualify true and accu	y for the exemption stated in Section 119 urate and that my signature shall have the	.07(3)(k), Florida Statutes. I further 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 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE:

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CORPORATION ANNUAL REPORT 199# 7



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Scoretary of State

DIVISION OF CORPORATIONS

1. Corporation	A GLASS OF TAMPA BAY, I	•	,			
Principal Place	of Business	Mailing Address				
40947-U.S. 48 NORTH. #298 TARRON SPRINGS FL 34699		40347-U.S. 19 NORTH. #238 TARPON SPRINGS FL 34689				
334 EL	ahe Rel # 700	334 P. J	ale Per	1#70		F IN THIS SPACE.
Palm Hunder, Fr 34685		334 C. Lake Pd # 70 Bolm Hubs ift 34665		3. Date Incorporated or Qualified 07/06/1993	3a. Date of Last Report	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	12/13/1994 Applied For	
21 Principal Place of Cusiness		26		59-3191976	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State	9	Cily & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip Country 25		Ζφ 29	Country 30		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New	Registered Agent
1	10.07511		'	B1 Name		•
MURACO,			ī	B2 Street Addre	ess (P.O. Box Number is Not Accepta	ble)
	KE ROAD #70 RBOR FL 34685		ļ.	83		
FALM DA	NDUN FL 34000			03		
			[7	84 City		FL 85 Zip Code
or register familiar wit	to the provisions of Sections 607,0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	la Such change was author on 607.0505, Florida Statute	ized by the co s.	orporation's board	d of directors. I hereby accept the app	pointment as régistered agent. I am
12,	Signature, typed or posted name of ingestired agent. OFFICERS AND		IOTE Registered /	lgont signature required		FICERS AND DIRECTORS IN 12
TITLE			1 1 11	LE I	ADDITIONO DI PRINCEO TO OTI	Change Addition
NAME	MURACO, JOSEPH		1.2 NAME			— <i>-</i> —
STREET ADDRESS 334 E LAKE ROAD #70			1.3 STREET ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL 34685		1.4 CH	Y-S1-7IP		
TITLE	STD		2 1 1111	.E		Change Addition
NAME	MULLAN, KEVIN T		2.2 NAM	ME	•	
STREET ADDRESS	40347 U.S. 19 N., #238		2 3 STR	REET ADDRESS		
CITY-ST-ZIP	TARPON SPRINGS FL 34689			Y-ST-ZIP		
TITLE			3.1 1111			Change Addition
NAME			3.2 NAM			
STREET ADDRESS				RELT ADDRESS		
CITY-ST-ZIP TITLE			4.1 TITU	Y-\$T-ZIP LF		Change Addition
NAME			4.2 NAM			—
STREET ADDRESS				REET ADORESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE			5 1 TITL			Change Addition
NAME			5.2 NA	ME		16 . 100
STREET ADDRESS			5.3 STA	REE1 ADDRESS		\(\)^\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-ST-ZIP		,,	5.4 CIT	Y - \$1 - ZIP		11/9/11
TITLE			6.1 T(I)	i	. مسلم مرابع المسلم ، موجع المسلم المسلم	Change Addition
NAME			6.2 NA	l	90000229 -09/22/97010	##18 #
STREET ADDRESS				REET ADDRESS	-09/22/97011	J3ピー-U55
CITY-ST-ZIP 6.4 C 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and				Y-ST-ZIP	***\$50.00	0.07/3)/W. Florida Statutas I fudbo:
THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPER	t the information indicated on this way.	vior tino ming to voluntably lu	maneu dilu U	was not quality to	and exemplion stated in Section 113	a same lead effect on it made under

ceruity triat the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE: