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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

P94000001720 (9)

ADVANCED STOREFRONT & GLASS, INC.

Mailing Address Principal Place of Business 14340 SW 142 AVENUE 14340 SW 142 AVENUE MIAMI FL 33186 MIAMI FL 33186 3a. Date of Last Report 3. Date Incorporated or Qualified 03/07/1995 12/30/1993 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 64-0458239 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Ant. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Zφ Country Zin Yes X No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) ALAN M. BURGER, P.A. 9990 S.W. 77TH AVE. 63 **PENTHOUSE 5** Zip Code 33 (3) MIAMI FL 33156 84 MIANI 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition ☐ DELETE 1.1 TITLE DΡ TITLE CR2E034 12 NAME IKEDA, JERRY A NAME 1.3 STREET ADDRESS 14340 SW 142 AVENUE STREET ADDRESS MIAMI FL 1.4 CITY - \$1 - ZIP DITY-ST-ZIP ☐ Addition Change DELETE 2 1 TITLE TITLE CD 2.2 NAME WILLIAMS, THOMAS NAME 23 STREET ADDRESS 10900 S.W. 80TH AVE. STREET ADDRESS 2.4 CITY-ST-ZIP MIAMI FL CITY - ST - ZIP Addition ☐ Change DELETE 3. 1 TITLE TITLE ST 3 2 NAME WILLIAMS, ROGER D. 3.3. STREET ADDRESS 9431 SW 184 TERR STREET ADDRESS 34 CITY - ST - ZIP MIAMI FL CITY-S1-ZIP ☐ Change Addition DELETE 4.1 TITLE TITLE 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 THILE TILLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that 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 on an attachment with an address. 6.4 CITY - ST - ZIP

KOGERD, WILLIAMS

4/15/96