FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 19 1998 8:00am

ANNUAL REPORT 1998		7. /	Secretary of State DiVISION OF CORPORATIONS		Secretary of State
		0014661 (0)			
HIBEK I	GLASS PLUS, INC.				
Principal Plac	e of Business	Mailing Address			\$ 40011004 550 50511 01015 80115 00511 00111 00101 61016 01110 01103 1101 1001
2038 S COMBEE RD		2038 S COMBEE RD			
LAKELAND FL 33801		LAKELAND FL 33801			DO NOT WRITE IN THIS COACE
us		US	US		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
					02/16/1994
2. Principal P	Place of Business	2a, Mailing Address			4. FEI Number Applied For
21		26	26		59-3225827 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27			Fee Required
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has paid the current year Intangible
24	25]		30		Personal Property Tax due June 30. 🔲 Yes 🔲 No
9 Name and Address of Current Registered Agent CORDONATION INCOMMENTON CERTIFICATION				10. Name and Address of New Registered Agent	
CORPORATION INFORMATION SERVICES INC.			ľ	1 Name	
	01 HAYS ST. Llahassæe fl 32301		8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)
			8	3	
84 City				4 City	85 Zip Code
11 Pursuant	to the provisions of Section 607 050	12 and 607 1508. Florida Statute	s the abo	ve-named co	ornoration submits this statement for the number of changing its registered
office or r	egistered agent, or both the State	of Florida. Such change was a	ilhovized l	by the corpor	orporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	in damilar with, and accept the string	ations of, Section 607,0303, Fior	Statut	US.	5/1/98
SIGNATURE	Signature balled or partial falling of importance and	ent and title if applicable (NOTE)	Registered A	gent signature rec	equired when reinstating) DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	OP .	DELETE	1.1 TITLE		Change Addition
NAME	KOVACS, LESLIE K		1.2 NAM		
STREET ADDRESS	\$022 WATERFIELD LANE			ET ADDRESS	
CITY-ST-ZIP TITLE	LAKELAND FL 33803			-ST-ZIP	☐ Change ☐ Addition
NAME	\$ CHEIDLER, EARL				Change C Abanton
STREET ADDRESS	3022 WATERFIELD LANE		2.2 NAMI 2.3 STRE	ET ADDRESS	
CITY-ST-ZIP	A Blame as an market		2. 4 City		
TITLE	1	☐ DELETE	3.1 TITLE		Change Addition
NAME	SA UL, KEN		3.2 NAM6		
STREET ADDRESS	3022 WATERFIELD LANE		3.3 STRE	ET ADDRESS	
CITY-ST-ZIP	LAKELAND FL 33803		3.4. CITY	- ST - ZIP	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CiTY-		☐ Change ☐ Addition
TITLE NAME		L.J DELETE	5.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY-		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		-
STREET ADDRESS	•		6.3 STREE	ET ADDRESS	
0177 67 710			1		

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplement a finual 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 sceneror 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 option analysis with an address.