

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

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016377 (1)

1. Corporation Name

ASHE GLASS & MIRROR, INC.

Principal Place of Business

4850 E BUSCH BLVD.
TAMPA FL 33617-6012

Mailing Address

4850 E BUSCH BLVD.
TAMPA FL 33617-6012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/28/1994

4. FEI Number

59-3229165

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 8106 Temple Terrace Hwy. 27 8106 Temple Terrace Hwy.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Temple Terrace FL 28 Temple Terrace, FL

28 Temple Terrace, FL

Zip

Zip

24 33637 25 33637 29 33637 30 33637

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ASHE, FRANK M
4850 E BUSCH BLVD.
TAMPA FL 33617-6012

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 8106 Temple Terrace Hwy.

84 City

Temple Terrace

FL

85 Zip Code

33637

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

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE P
NAME ASHE, FRANK M.
STREET ADDRESS 3605 CORONA ST.
CITY-ST-ZIP TAMPA FL

TITLE V
NAME HARRIS, ARTHUR G.
STREET ADDRESS 4212 E. 97TH AVE.
CITY-ST-ZIP TAMPA FL

TITLE TS
NAME ASHE, LINDA J.
STREET ADDRESS 3605 CORONA ST.
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby 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 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.

SIGNATURE:

Signature: [Handwritten Signature]

1-12-98 10130988-5565

CR2E034 (10/97)