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PROFIT CORPORATION **ANNUAL REPORT**

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

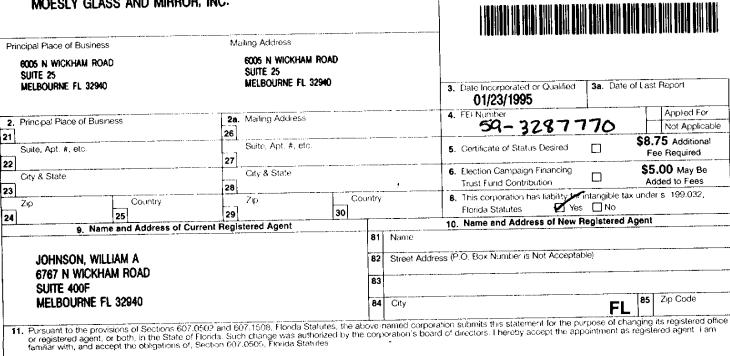
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P95000006546 (2)

MOESLY GLASS AND MIRROR, INC.



Signature typed or pretent table to indicate and an additional approximation			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTORS	DELETE	1 1 TILE	Change Addition
TITLE	- עד	ווברבוב	ì	
NAME	MOELSY, JOHN M	I	1.2 NAME	
STREET ADDRESS	2210 ROCWAY DRIVE		13 STREET ADDRESS	
CITY-ST ZIP	MELBOURNE FL 32935		1.4 CITY - ST - ZIP	Change Addition
TITLE	V	DELETE :	2 1 TIFLE	
NAME	MINERD, JOHN		2.2 NAM:	DELETE JOHN MINERS
STREET ADORESS	6005 N WICKHAM ROAD, SUITE 25		23 STREET ADDRESS	
CITY-SI-7IP	MELBOURNE FL 32940		2 4 CITY - ST - ZIP	Change Addition
TiTLE] DELETÉ	3 1 TIFLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			33 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY S1-ZIP	
TiTLE] DELETE	4 t Till(f	Change Addition
NAME			4.2 NAMí	
1			4.3 STPEE! ACORESS	
STREET ADDRESS			4.4 CiTy St-ZIP	
CiTY-SI-ZIP		T DELETE	5 1 10118	9000181934 Gaage Add tion -05/14/9601004022
TITLE			5.2 NAMÉ	-05/14/9601004022
NAME			5 3 STREET ADDRESS	***200.00 \\
STREET ADDRESS			5.4 CITY - ST - ZIP	***************************************
CITY - ST - ZIF	Γ	7 DELETE	6 1 TITLE	Change Addition
TITLE	_	_,	62 NAME	$\mathcal{J}_{\mathcal{N}}$
NAME			63 STREET ADDRESS	
STREET ADDRESS			· -	
CITY - ST - ZIP			6 4 CITY - SI - ZIF	Statutes I further

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 cath; that I am an officer or director of the corporation or the receiver or trusted 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)