

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 28, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000011220

1. Entity Name
AMERICAN GLASS GROUP, INC.



Principal Place of Business

111 SW 107 AVE
MIAMI, FL 33174 US

Mailing Address

1965 W 63 ST
HIALEAH, FL 33012 US

DO NOT WRITE IN THIS SPACE



02242005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0717112

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHAO, JOSE V
1965 WEST 63RD STREET
HIALEAH, FL 33012

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CHAO, JOSE V
STREET ADDRESS	1965 WEST 63RD STREET
CITY-STATE-ZIP	HIALEAH, FL 33012
TITLE	VP
NAME	HERRERA, ISIDORO T
STREET ADDRESS	140 N.W. 87TH AVENUE, G-212
CITY-STATE-ZIP	MIAMI, FL 33172
TITLE	S
NAME	CHAO, ILEANA
STREET ADDRESS	1965 WEST 63RD STREET
CITY-STATE-ZIP	HIALEAH, FL 33012
TITLE	D
NAME	HERRERA, LEONOR
STREET ADDRESS	140 N.W. 87TH AVENUE, G-212
CITY-STATE-ZIP	MIAMI, FL 33172

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/05

Daytime Phone #