

**PROFIT
CORPORATION
ANNUAL REPORT
1996**


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

DOCUMENT # 895000074198

1. Corporation Name

Diamond Glass & Mirrors, Inc.

Principal Place of Business

Mailing Address

**12396 S.W. 51 Place
Cooper City, FL 33330**

APPROVED 02/02
AND
FILED

55 JUL 12 AM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7000001891377
07/12/96-01085-003
****225.00 ****225.00

3. Date Incorporated or Qualified 9/26/95		3a. Date of Last Report N/A	
4. FEI Number 65-0611063		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 has liability for intangible tax under s. 199 (3)(2), Florida Statutes ☐ Yes ☐ No			

2. Principal Place of Business		2a. Mailing Address	
21. 1899 N.W. 29 Street Suite, Apt. #, etc.		25. 1899 N.W. 29 Street Suite, Apt. #, etc.	
22. City & State Ft. Lauderdale, FL		27. City & State Ft. Lauderdale, FL	
23. Zip 33311		28. Zip 33311	
24. Broward		30. Broward	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Legal Information Services, Inc. 1290 Weston Road, Suite 300 Ft. Lauderdale, Florida 33326		81. Name Legal Information Services, Inc.	
		82. Street Address (P.O. Box Number is Not Acceptable) 1290 Weston Road, Suite 300	
		83. City Ft. Lauderdale	
		84. State FL	
		85. Zip Code 33326	

11. Pursuant to the provisions of Sections 607.0505 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, to 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 agree to, the provisions of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE *[Date]*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE President		1.1 TITLE President	
2. NAME Joseph M. Martucci		1.2 NAME Neil Brody	
3. STREET ADDRESS 12396 S.W. 51 Place		1.3 STREET ADDRESS 1899 N.W. 29 Street	
4. CITY - ST - ZIP Cooper City - FL 33330		1.4 CITY - ST - ZIP Ft. Lauderdale, FL 33311	
5. TITLE Vice President		2.1 TITLE Vice President	
6. NAME Monica M. Martucci		2.2 NAME Joseph M. Martucci	
7. STREET ADDRESS 12396 S.W. 51 Place		2.3 STREET ADDRESS 1899 N.W. 29 Street	
8. CITY - ST - ZIP Cooper City, FL 33330		2.4 CITY - ST - ZIP Fort Lauderdale, FL 33311	
9. TITLE Vice President		3.1 TITLE Vice President	
10. NAME Anthony Martucci		3.2 NAME Anthony Martucci	
11. STREET ADDRESS 1899 N.W. 29 Street		3.3 STREET ADDRESS 1899 N.W. 29 Street	
12. CITY - ST - ZIP Ft. Lauderdale, FL 33311		3.4 CITY - ST - ZIP Ft. Lauderdale, FL 33311	
13. TITLE 		4.1 TITLE 	
14. NAME 		4.2 NAME 	
15. STREET ADDRESS 		4.3 STREET ADDRESS 	
16. CITY - ST - ZIP 		4.4 CITY - ST - ZIP 	
17. TITLE 		5.1 TITLE 	
18. NAME 		5.2 NAME 	
19. STREET ADDRESS 		5.3 STREET ADDRESS 	
20. CITY - ST - ZIP 		5.4 CITY - ST - ZIP 	

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 as an attachment with an address.

SIGNATURE: *[Signature]* DATE: **7/10/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Joseph M. Martucci, V.P.**