

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000079731 (2)

1. Corporation Name

MAGIC TOUCH AUTO GLASS, INC.



Principal Place of Business

8221 S.W. 9TH COURT
NORTH LAUDERDALE FL 33068

Mailing Address

8221 S.W. 9TH COURT
NORTH LAUDERDALE FL 33068

3. Date Incorporated or Qualified

10/13/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

GUADELUPE, OSCAR
8221 S.W. 9TH COURT
NORTH LAUDERDALE FL 33068

4. FEI Number

65-0619477

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. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 of President or Principal Officer (Registered Agent or other responsible officer)

(If the Registered Agent Signature is required, check the box below)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

PRESIDENT
OSCAR Guadalupe
8221 S.W. 9th Court
N. Lauderdale, FL 33068

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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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 made in the 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oscar Guadalupe Pres.

000001925600
-08/19/96--01045--007
***225.00

16-28-96

Date:

1996-08-16
1294.1649

CR2E034 (12/95)