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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

* Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000003341 (0)

JOHN THE GLASS MAN OF SOUTH FLORIDA, INC.

FILED Apr 20 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address									i yadirbat 418 Oktiba birit datut bakkt d	DIN VUNI BE		KIIK OL	
1512 HE 30 CT		1512 NE 30 CT POMPANO BEACH FL 33064						· DO NOT WRITE	INI TIJIC G	PACE			
ļ							}	2	Date Incorporated or Qualified	1010	FACE		
								J.	01/08/1996				
2. Principal Place of B	Business	2a.	Mailing Address					4.	FEI Number			Apr	lied For
21									65-0636327			_	Applicable
Suite, Apt ₩, etc.			Suite, Apt. #, etc.								\$8.7		dditional
22								ъ.	Certificate of Status Desired		Fe	e Req	uired
City & State			City & State					6.	Election Campaign Financing		\$ 5.	.00 A	/lay Be
23								Trust Fund Contribution	<u> </u>	Add	ded to	Fees	
Zip	Country		Zip	\vdash	untry	′		8.	This corporation owes or has paid				
24	25] ime and Address of Currer	29	tored Agent	<u> </u> 30				40	Personal Property Tax due June : Name and Address of New Reg		Yes	<u> </u>	No
	81 Name					10.	Hante and Addissa Of Hew Nes	ilatorou ,	your				
LAPOINT	-					L							
1512 NE 30 CT			82 Street			Street Addres	ss (P	P.O. Box Number is Not Acceptable	e)				
PUMPAN	10 BEACH FL 33064				83								
į						L							
ļ					84	(City			FI	85	Zip C	ode
11. Pursuant to the pre	ovisions of Sections 607.050	2 and 6	07.1508, Florida Statu	ites, the i	above	L	named corpor	atio	n submits this statement for the pu	roose of	changi	na its	registered
office or registered	d agent, or tioth, in the State	of Florid	da Such change was L Section 607 0505 E	authorize	ed by	/ th	he corporation	n's b	on submits this statement for the publicated of directors. I hereby accept	the app	ointmen	t as re	egistered
	with, and decept the congr		1, 66001011 601.0000, 1	ionaa oit	1000								
SIGNATURE Signature 1	typed or printed name of registered age	int and bile	if applicable (NO	TE: Register	ed Age	nt i	signature required	when	n reinstating)	DATE			
12.	OFFICERS AN	D DIREC		13.		_		- 1	ADDITIONS/CHANGES TO OFFICE	RS AND			
TITLE P			DELETE	1.1	TITLE		İ				Cha	nge	☐ Addition
	HN, LAPOINTE P				NAME				•				
1 1 1	10.12.112.00.111.000.11						STREET ADDRESS						
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TITLE			L DELETE	DELETE 2.1 T/		1			* -	;	[C1181	iße	ן ואטווטטא ניין
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CITY-S1-ZIP			DELETE		CITY-S	<u> </u>	ZIP				Chai	noe	Addition
NAME					NAME							•	
STREET ADDRESS						AD	DAESS						-
CITY-ST-ZIP					CITY-5								
TITLE		·	☐ DELETE		TITLE				**		Char	nge	Addition
NAME				4. 2	NAME								
STREET ADDRESS				4.3 3	STREET	AD	ORESS						
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NAME				5.21	MAME		1						
STREET ADDRESS				5.3 \$	STREET	ΑD	DRESS						
CITY-ST-ZIP					CITY-S	T - Z	ZIP				T 7		
TITLE			☐ DELETE	611							☐ Char	nge	Addition
NAME					AME								
STREET ADDRESS							DRESS						
CITY-ST-ZIP	at the information supplied a	iths their d	ding dogs not qualify		S-YIK			actic	on 119.07(3)(i), Florida Statutes, I f	urther oo	tify the	tho:	formation

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 incolver of 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 attaching with an address.

SIGNATURE:

John P. MPOINTE

April 10

1998