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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000027950

STREET ADDRESS

CITY-ST-ZIP

SONLIGHT GLASS AND MIRROR INC.

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- Principal Place	of Business	Mailing Address	وحرسانة ينجين	The state of the s	-
2001 RIO DE JA PUNTA GORDA US		64 OAK AVE FT MYERS FL 33903		E DO NOT WRITE IN THIS SPACE	
	·			3. Date Incorporated or Qualifed 03/25/1996	
2. Principal Pl	ace of Business OAK ST	2a. Mailing Address		4. FEI Number Applied For 65-0657540 Not Applicat	le
Suite, Apt. i		Suite, Apt. #, etc.		5. Certifcate of Status Desired See Required	
City & State	YEXS FLA	City & State		6. Election Campaign Financing Trust Fund Contribution S 5.00 May Be Added to Fees	
Zip 339	Country	Zip 29 30	Country	8. This corporation owes the current year Intangible Personal Property Tax.	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent	
			81 Name	Dere To the second seco	
	n, robert Dak ave		82 Street	I Address (P.O. Box Number is Not Acceptable)	_
FT M	IYERS FL 33903		83		
	•		84 City	FL 85 Zip Code	
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office or re agent. I ar SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was auth gations of, Section 607.0505, Florida	orized by the corp a Statutes.	d corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered	ī
office or re agent. I ar SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the obli- Signature, typed or printed name of registered a	te of Florida. Such change was auth- gations of, Section 607.0505, Florida agent and title if applicable. (NOTE: Re-	orized by the corp a Statutes. gistered Agent signature	poration's board of directors. I nereby accept the appointment as registered required when reinstating) DATE	
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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 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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90072 036 ***150.00