2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # **P96000042430** 1. Entity Name GLASS SERVICE USA, INC. 04-27-2001 90385 047 ***150.00 Principal Place of Business Mailing Address ROUYTNICE GO ROUYTNICE GO VSETIN, CZECH REPUBLIC 75501 VSETIN, CZECH REPUBLIC 75501 000/04 2. Principal Place of Business 3. Mailing Address PORYTNICE 60(SIXTY BOLYTNICE GO Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3380710 VSETIN KETIN Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired CZECH ZETUBLIC CZECH ZEPUBLIC 755 O1 75501 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARTHUR R. LOUV Street Address (P.O. Box Number is Not Acceptable) STE. #201 801 N. MAGNOLIA AVE. ORLANDO FL 32803 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change CHMELAR PETR CHMELAR, PETR NAME STREET ADDRESS POLYTNICE GO HRBOVA 1561, 755 01 STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP 75501 VSETIN CZECH REPUBLIC VSETIN, CZECH REPUBLIC ☐ Delete TITLE Change Addition CHMELAR, JOSEF CHMELAR JOSEF NAME STREET ADDRESS HRBOVA 1561, 755 01 20LYTNICE GO STREET ADDRESS 75501 ISETIN, CZECH ZEPUBLIC CITY-ST-ZIP CITY-ST-ZIP VSETIN, CZECH REPUBLIC TITLE ☐ Delete TITLE Change ☐ Addition LOUV, ARTHER R. NAME NAME STREET ADDRESS 2501 CLARK ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP APOPKA FL TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 011Y-55-719 TITLE ☐ Delete DILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-712

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

PETR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR