

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 13, 2005 8:00 am
Secretary of State

07-13-2005 90021 037 ***150.00

DOCUMENT # P96000055395

1. Entity Name
CUSTOM GLASS & MIRROR, INC.



Principal Place of Business
**2825 BUSINESS CTR BLVD
SUITE A-9
MELBOURNE, FL 32940 US**

Mailing Address
**2825 BUSINESS CTR BLVD
SUITE A-9
MELBOURNE, FL 32940 US**



07062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3045629	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CURTIN, KEN
2825 BUSINESS CTR BLVD
SUITE A-9
MELBOURNE, FL 32940**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CURTIN, KENNETH 2825 BUSINESS CTR BLVD, STE A-9 MELBOURNE, FL 32940
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Adam Curtin 2825 Businessctr Blvd #A9 Melbourne, FL 32940
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**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kenneth Curtin Kenneth Curtin 7/6/05 321-242-6003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

140181963

Custom Glass & Mirror, Inc.



2825 Business Center Blvd.
Suite A-9
Melbourne, FL 32940

Phone: 321-242-6003
Fax: 321-242-8552

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

RE: P96000055395

We received a postcard of Notice of Intent to Dissolve on July 1, 2005.

Several months ago we had sent in the bottom of our original notice to receive from your office a copy of our annual report. We never received the form back from your office. It was not until we received the Notice of Intent to Dissolve did it occur to me that we did not receive the form and that it was now overdue.

I would like to ask your department to waive the penalty fee of \$400.00 due to the fact we did not receive the form back from your office.

Thank you for your consideration.

Sincerely,

Ken Curtin

KC/ka