

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**BISCHOFF, RANDALL
2825 BUSINESS CTR BLVD
SUITE A-9
MELBOURNE FL 32940**

Name

Ken Curtin

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

**2825 Business Ctr Blvd
Suite A-9**

City

Melbourne

FL **32940**

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

Ken Curtin Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-2-03 DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

**TITLE DST
NAME BISCHOFF, PATRICIA
STREET ADDRESS 2825 BUSINESS CTR BLVD, STE A-9
CITY-ST-ZIP MELBOURNE FL 32940**

Delete

**TITLE DP
NAME BISCHOFF, RANDALL
STREET ADDRESS 2825 BUSINESS CTR BLVD, STE A-9
CITY-ST-ZIP MELBOURNE FL 32940**

Delete

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**P
Kennett Curtin
2825 Business Ctr Blvd A-9
Melbourne, FL 32940**

Change Addition

Change Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

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.

Ken Curtin Signature

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-2-03

321-242-6003

Date

Daytime Phone #

CR2E034 (10/02)

0088210

AV