



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000095846		
1. Entity Name GLASS LIMITED, INC.		
Principal Place of Business 1100 COMMERCIAL BLVD # 101 NAPLES, FL 34104	Mailing Address 1100 COMMERCIAL BLVD # 101 NAPLES, FL 34104	 01052006 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		
4. FEI Number 59-3408613		
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable
6. Name and Address of Current Registered Agent ELLIS, VICTORIA 1261 25TH STREET SW NAPLES, FL 34104		
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 <u>Victoria Ellis</u> <u>Victoria Ellis</u> <u>1-13-06</u> <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ELLIS, RENE J 1261 25TH STREET SW NAPLES, FL 34117	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT ELLIS, VICTORIA 1261 25TH STREET SW NAPLES, FL 34117	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HILTON, DIANE 1803 41ST STREET SW NAPLES, FL 34116	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Victoria Ellis</u> <u>Victoria Ellis</u> <u>1-13-06</u> <u>239-643-5442</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		