Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90047 033 \*\*\*158.75

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000102839

STREET ADDRESS

CITY-ST-ZIP

BELL GL	ASS AND GLAZING, INC.					! 12811041 170 TOTAL OFFI ANTI ASSIS SSIS BOTTS	911 98114 (1887)	 	111
				_					1111
Principal Place	e of Business	Maifing Addr	ess						
7908 ENDIVE AVE. 7908 ENDIVE AVE. TAMPA FL 33619-1334 TAMPA FL 33919-7334 US						DO NOT WRITE IN TI	IS SPACE	:	
05						3. Date Incorporated or Qualifed			
						12/18/1996			
2. Principal Pi	lace of Business	2a. Mailing A	Address			4. FEI Number		Applied Fo	r
21		26 79	D8 EN	d:va	= AUE	59-3430919		Not Applica	able
-Suite, Apt.	#, etc	<del></del>	t#, etc.			5. Certificate of Status Desired		<b>75</b> Additions e Required	ป -
City & State	e	City & St	tate		- 110	6. Election Campaign Financing	\$5.	.00 May Be	
23		28 TAN	10A FI	13	3 <i>61</i> 9	Trust Fund Contribution		ded to Fees	
Zip	Country	Zip	4	Country	,	8. This corporation owes the current year	Intangible		,
24	25	29 336/9	7333		<i>US</i>	Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Age	ent			10. Name and Address of New Register	ed Agent		
				81	Name				
BELL, ALBERT N SR. 7908 ENDIVE AVE.			82	Street Addre	ss (P.O. Box Number is Not Acceptable)	<del>.</del>	<del></del>		
	PA FL 33619-7334			83					
					<u> </u>				
				84	"		·L │	Zip Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligate	of Florida, Such c	hange was autho	rized by	the corporation	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	of changir pointment	ig its register as registered	ed
SIGNATURE									
OIGITATORE	Signature, typed or printed name of registered agen		(NOTE: Reg		nt signature required			OTODO IN 4	
12.	OFFICERS AND DIRECTORS		7	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRE		
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NAME	BELL, ALBERT N SR			1.2 NAME					ļ
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NAME	· ·			O'T INMINE					1

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