

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90043 010 \*\*\*150.00

**DOCUMENT # P96000104157**

1. Entity Name  
BRUNO'S MIRRORS AND GLASS, INC.



Principal Place of Business

1122 NW 79TH DR  
PLANTATION, FL 33322

Mailing Address

1122 NW 79TH DR  
PLANTATION, FL 33322

34010401



01232004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0717904	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

METAYER, BRUNO  
1122 NW 79TH DR  
PLANTATION, FL 33322

**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 \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	METAYER, BRUNO
STREET ADDRESS	1122 NW 79TH DR
CITY-ST-ZIP	PLANTATION, FL 33322

TITLE	V
NAME	GLOBIG, JOHN
STREET ADDRESS	1122 NW 79TH DR
CITY-ST-ZIP	PLANTATION, FL 33322

TITLE	V
NAME	MEASEL, JOSHUA
STREET ADDRESS	1122 NW 79TH DR
CITY-ST-ZIP	PLANTATION, FL 33322

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bruno Metayer

Date

2.10.4

Daytime Phone #

954-236-2413