## 2005 FOR PROFIT CORPORATION

## FILED Mar 30, 2005 8:00 am Secretary of State

	2005		NNU			 	IOI	
חחר	INVEV.	T # P9	6000	104	157			

DOCUMENT # P96000104157  1. Entity Name BRUNO'S MIRRORS AND GLASS, INC.							~	03-30-2005 9	-				
Principal Place of Business Mailing			ailing Address										
1122 NW 79TH DR				1122 NW 79TH DR					, •	500	3211	2	
PLANTATION, FL 33322 PLA			PLANTATION, FL 33322				0000112						
2. Principal Place of Business			3.	3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.			03212005	Chg-P	CR2E03	4 (10/03)			
City & State				City & State				4. FEI Number 65-0717				plied For t Applicable	
Zìp	Country			Zip	Country			5. Certificate of	of Status Desired		8.75 Add		
6. Name and Address of Current Registers			tered Agent	<u> </u>			7. Name and	Address of New R					
METAYER	BDIINO					Name							
1122 NW 7	9TH DR					Street Address (P.O. Box Number is Not Acceptable)							
PLANTATI	ON, FL 3	3322											
				City					Zip Code				
9 The above	named entit	v eubmite this state	mont for the r	ourness of obmosine its	rogistor		agistos	od agant as batt	in the State of Ele	FL	i i		
	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								<del></del>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.							\$5. Add	00 May Be ed to Fees					
10.	· · · · · · · · · · · · · · · · · · ·				11.			ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11	
TITLE NAME				TITU						Change	Addition		
STREET ADDRESS	1	79TH DR				ET ADDRESS							
CITY-ST-ZIP					-ST-ZIP								
TITLE	_ 5500				TITE						Change	☐ Addition	
NAME STREET ADDRESS	GLOBIG, JOHN 1122 NW 79TH DR					E ET ADDRESS							
CITY-ST-ZIP	l	TION, FL 33322				-ST-ZIP							
TITLE	V			🔀 Delete	TITL	E					Change	Addition	
NAME STREET ADDRESS		JOSHUA 79TH DR	-		NAM		_		_		-	_	
CITY-ST-ZIP		ION, FL 33322				ET ADDRESS -ST-ZIP							
TITLE		<u>.</u>		☐ Delete	TITL	E					☐ Change	☐ Addition	
NAME					NAM								
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP							
TITLE				☐ Delete	TITL	-					☐ Change	☐ Addition	
NAME					NAV	E							
STREET ADDRESS CITY-ST-ZIP					1	ET ADDRESS - ST- ZIP							
TITLE				☐ Delete	TITL		-		<u> </u>		☐ Change	☐ Addition	
NAME					NAM								
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS							
	Pertify that th	e information supp	lied with this f	ling does not qualify fo		-ST-ZIP	d in Sa	etion 110 07/21/	Florida Statutos	Liuriber com	fu that the '-	dormation	
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: Bruno Metayer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR