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 # P9700001639 1. Corporation Name

PANHANDLE	GLASS	INC.
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FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90101 010 ***150.00



Principal Plac	e of Business	Mailing Address					
3683 AVALON	BAVD	3683 AVALON BLVD.					
MILTON FL 32583 MILTO		MILTON FL 32583			DO NOT WRITE IN TH	IS SPACE	
U\$					Date Incorporated or Qualifed	O OI NOL	
					01/02/1997		- !
3 DID	lace of Business	22 Mailing Address			4. FEI Number		Applied For
— ' '''	ace of Business	2a. Mailing Address					Not Applicable
21	И -4-	26			59-3447802		Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Required
22	(nue				6.5.4.0		
City & Star	[®] ン′	City & State			6. Election Campaign Financing		May Be d to Fees
23	- Country	28	Cour	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution		d to rees
Zip	Country	Zip		iu y	This corporation owes the current year I Personal Property Tax.	ntangibie ☐ Yes	11100
24	25	<u></u>	30		10. Name and Address of New Registere		- X
	9. Name and Address of Curren	r vadizratao waatir		81 Name	TO Raine and Address of New Address	u Agont	
MAS	AITIS, GERALD		į				
	SWEET BAY DRIVE		(82 Street A	ddress (P.O. Box Number is Not Acceptable)		1
	E FL 32571		1	83	- Auc.		
170	C 1 C 0207 1			63	<i>J</i> .		İ
	•]	84 City	٠	85 Zi	p Code
			1		F		
11 Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the at	ove-named o	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	of changing	its registered registered
agent. I a	m familiar with, and accept the offigal	tions of, Section 607.0505, Flori	da Statu	tes.	radion's board or directors, thereby accept the app		
SIGNATURE	Ill March	Haes.			4-2-55		
SIGNATURE	Signature, typed or printed name of registered agen			Agent signature rea	quired when reinstating)		5000 111 40
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	ł P	☐ DELETE	1.1 TIT	Æ		Chang	e
NAME, 3-1.	Masaitis, Gerald		1.2 NA	ME	SANC		
STREET ADDRESS	3552 SWEET BAY DRIVE		1.3 ST	REET ADDRESS	> ~ ~		
CITY-ST-ZIP	PACE FL 32571		1.4 CIT	Y-ST-ZIP			
TITLE	VPS	☐ DELETE	2.1 TIT	Æ	Sume	☐ Chang	e
NAME	MASAITIS, GLORIA D		2.2 NA	ME	<i>C</i>		
STREET ADDRESS	3552 SWEET BAY DRIVE		2.3 STI	REET ADDRESS) store		1
CITY-ST-ZIP	PACE FL 32751		2. 4 CF	Y-ST-ZIP			
TITLE		☐ DELETE	3.1 TIT	E		Chang	e Addition
NAME			3.2 NA	AE			ŀ
STREET ADDRESS			3.3 STI	REET ADDRESS			ļ
CITY-ST-ZIP	i i		3.4. CD	Y-ST-ZIP			
TITLE		☐ DELETE	4.1 TIT			☐ Chang	e 🔲 Addition
NAME			4. 2 NA	ME ´			
STREET ADDRESS			4.3 STI	REET ADDRESS			ļ
CITY-ST-ZIP				Y-ST-ZIP			in the second
TITLE		☐ DELETE	5.1 TITI			Change	Addition
NAME			5.2 NA				
STREET ADDRESS		•	5.3 STF	EET ADDRESS			}
				Y-ST-ZIP			ļ
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITI			Change	e Addition
			6.2 NA				
NAME				EET ADDRESS			}
STREET ADDRESS			ااد د.ب	LL: ADURESS	-		ì
				Y-ST-ZIP			1

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.

SIGNATURE: