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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

APPRUYED

	1998		Secretary DIVISION OF CO				186	DEC 21	PH 2:	40
DOCUMENT # P97000013656 1. Corporation Name							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Insul	ated Glass	Industries	, Inc.				Refletig consideriti	i i gagete da a a a		THE PARTY OF
Principal Plac	ce of Business	Mailir	ng Address		- :		<u> </u>			
3948 Sc	outh 3rd St	394	8 South 3r	rd St	.					
Suite 3	342	Sui	te 342			ĺ	DO NOT WRIT	TE IN THIS S	SPACE	
Jackson	ville, FL	32250 Jac	ksonville,	, FL	3225	50 T	3. Date Incorporated or Qualified	i		1
		•	•				02/12/97			į
2. Principal I	Place of Business	2a, M	ailing Address				4. FEI Number		Ap	polled For
21		26					59-3425730		No	t Applicable
Suite, Apt	. #, etc	· —	uite, Apt. #, etc.				5. Certificate of Status Desired	. 🗆	\$8.75	
22 City & Sta			ty & State				Floating Compains Floating		Fee Re	
23		28	ny d Oldro		-		5. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Count		P	Cour	itry		B. This corporation owes or has p	paid the cur		
24	25			30			Personal Property Tax due Jur	ne 30.	Yes 🔯	OM [
ļ	9. Name and Addi	ress of Current Register	ed Agent			1	0. Name and Address of New F	Registered A	Agent	
Harou	tunian, Je	effrev		1	81 Name					
	South 3rd			ſ	82 Street A	Address	(P.O. Box Number is Not Accept	able)		
Suite					83					
	onville, F	'L 32250		1	<u> </u>					
					84 City	_		FL	85 Zip (Code
11 Quecusos	to the provisions of Se	clienc 607 0502 and 607	1500 Electric Statutos	0 45 - 45			in a sharita this at tame of fact h	<u> </u>		0.0000000000
			1500. Fichida Statute:	s, me ao	ove-namec e	corpora	ion suomits this statement for the	e purpose or	changing it	S registeres !
office or	registered agent, or bo	th, in the State of Florida.	Such change was at ection 607,0505. Flor	s, the ac uthorized rida Stati	ove-named of by the corp	corpora oration's	s board of directors. I hereby acc	ept the app	ointment as	registered
		th, in the State of Florida.	Such change was at ection 607.0505, Flor	s, the ab uthorized rida Statu	by the corp ites.	corpora oration's	ion submits this statement for the board of directors. I hereby acc	e purpose or ept the app	ointment as	registered
office or agent. 1: SIGNATURE	Signature, typed or printed nar	me of registered agent and title if a	ppicacie, (NOTE:	Registered	by the corp		en refrataling)	DATE		
SIGNATURE	Signature, typed or printed name		opicacie. (NOTE	Registered	Agent signature			DATE	DIRECTOR	IS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed nar	me of registered agent and title if a OFFICERS AND DIRECT	ppicacie, (NOTE:	Registered 13.	Agent signature		en refrataling)	DATE		
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1.4. Thereby 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 supplicipantal annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are an officer or director of the corporation of the positive 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 appears in this an address.

Jeffrey Haroutunian

09/24/98 Pagnetime * 004555