

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P97000029760

1. Entity Name  
PROGRESSIVE GLASS & MIRRORS INC.



Principal Place of Business  
PROGRESSIVE GLASS AND MIRROR  
1515 CYPRESS DR  
JUPITER, FL 33469 US

Mailing Address  
15434 MELLEN LN  
JUPITER, FL 33478

**FILED  
May 04, 2007 08:00 A  
Secretary of State**



05022007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0740697	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**DO NOT WRITE IN THIS SPACE**

**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 \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution.

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	BORUCKI, STANISLAW
STREET ADDRESS	15434 MELLEN LN
CITY-ST-ZIP	JUPITER, FL 33478

TITLE	VP
NAME	BORUCKI, ALINA
STREET ADDRESS	15434 MELLEN LN
CITY-ST-ZIP	JUPITER, FL 33478

TITLE	D
NAME	BORUCKI, STANISLAW E
STREET ADDRESS	142 BLACK WATER DR
CITY-ST-ZIP	HARVEST, AL 35749

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Stanislaw Borucki* **561-747-4246**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4c 30-0* Daytime Phone #