

## **2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000011087

Entity Name: PREMIER GLASS & MIRROR, INC.

**FILED**  
**Apr 29, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

172 S INDUSTRIAL DRIVE  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

172 S INDUSTRIAL DRIVE  
ORANGE CITY, FL 32763

**New Mailing Address:**

FEI Number: 59-3491728

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MULRONEY, TIMOTHY J  
172 S INDUSTRIAL AVE  
ORANGE CITY, FL 32763 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: MILRONEY, JODY L  
Address: 107 E GARDENIA DR  
City-St-Zip: ORANGE CITY, FL 32763

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P ( ) Change (X) Addition  
Name: MULRONEY, TIMOTHY J  
Address: 109 PINE SIDE DRIVE  
City-St-Zip: DEBARY, FL 32713

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM MULRONEY

P

04/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date