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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90293 048 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1999

DOCUMENT # P98 000018182

1. Corporation Name

Reliable Glass Inc ✓

Principal Place of Business

Mailing Address

2. Principal Place of Business

1550-8 Latham Rd

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33409

Country

25

2a. Mailing Address

1550-8 Latham Rd

Suite, Apt. #, etc.

City & State

W. Palm Beach, FL

Zip

33409

Country

29

30

3. Date Incorporated or Qualified

3a. Date of Last Report

2-23-98

4. FEI Number

65-0818637

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☒ No ☐

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Kerry Schwencke
1645 P.B. Lakes Blvd Ste 720
West Palm Beach, FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

14. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Pres
Stanley Chitoff
1550-8 Latham Rd
West Palm Beach, FL

DELETE

S/T
Dennis Hudash
1550-8 Latham Rd
West Palm Beach, FL

DELETE

ST-ZIP

DELETE

ST-ZIP

DELETE

ST-ZIP

DELETE

ST-ZIP

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

Change

Addition

I do 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.

SIGNATURE

Stanley Chitoff Pres 4/30/99