

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000034243

**FILED**  
**Mar 10, 2009**  
**Secretary of State**

**Entity Name:** OSCAR BARBERY GLASS, INC.

**Current Principal Place of Business:**

3602 S. HESPERIDES STREET  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 320035  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 59-3505496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BARBERY, OSCAR H JR.  
3602 S. HESPERIDES STREET  
TAMPA, FL 33629 US

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

BARBERY, OSCAR H CEOOSC.  
3602 S. HESPERIDES STREET  
TAMPA, FL 33629 US

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: OSCAR BARBERY

03/10/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BARBERY, OSCAR H JR.  
Address: 3602 S. HESPERIDES STREET  
City-St-Zip: TAMPA, FL 33629

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

Title: CEO (X) Change ( ) Addition  
Name: BARBERY, OSCAR H JR.  
Address: 3602 S. HESPERIDES STREET  
City-St-Zip: TAMPA, FL 33629

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: OSCAR BARBERY

CEO

03/10/2009

Electronic Signature of Signing Officer or Director

Date