## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 27, 2005 08:00 AN Secretary of State

DOCUMENT # P9900007776  1. Entity Name GLASSMAN EXPRESS, INC.				Secretary of Stat		
949 COBBL	ce of Business ESTONE DRIVE RK, FL 32065	Mailing Address 949 COBBLESTONE DRIVE ORANGE PARK, FL 32065	,		INITE INITE WATER WATER WATER WATER CONTROL OF THE STATE	
C	OO NOT WRITE	IN THIS SPA	CE	03272005 4. FEI Number 58-2439	633	
JACKSON	O SAN JOSE BLVD. IVILLE, FL 32257	DO NOT WRITE IN THIS SPACE				
8. The above the obliga- SIGNATURE.	o named entity submits this statement for tions of registered agent.  Signature, typed or printed name of registered agent a	naida	ed office or registers : d Agent signature required	_ <u>.</u>	, in the State of Florida. I am fam  A  DATE	illar with, and accept
After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	. <u> </u>		00 May Be ad to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS MAIDEN, MICHAEL A 949 COBBLESTONE DRIVE ORANGE PARK, FL 32065	JRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MAIDEN, MICHAEL A 949 COBBLESTON DRIVE ORANGE PARK, FL 32065	. <u></u>			100000334313 <u>04/27/05-80</u> 039-0	017 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1.127	·		■DO i	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-\$1-ZIP						
cuangeu,	certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empoy or on an attachment with an apdress, with the contract of the contract	his filing does not qualify for the exer- rue and accurate and that my signati- vered to execute this report as requir- th all other like empowered.	nption stated in Sec ure shall have the se ed by Chapter 607,	tion 119.07(3)(i), ame legal effect a Florida Statutes;	Florida Statutes. I further certify to as if made under ceth; that I am a and that my name appears in Blo	hat the information n officer or director ock 10 or Block 11 if
SIGNAT		NTED NAME OF RIGHING OFFICER OR DIRECT	DR .	10	25.05 10 9 Daytime	134 300 2 2 Phone #