

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107247

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: ETCHED GLASS OVERLAY, INC.

## Current Principal Place of Business:

8901 NW 38TH DRIVE  
STE #108  
CORAL SPRINGS, FL 33065 US

## New Principal Place of Business:

## Current Mailing Address:

8901 NW 38TH DRIVE  
STE #108  
CORAL SPRINGS, FL 33065 US

## New Mailing Address:

FEI Number: 65-0992389      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, DIANNE  
8901 NW 38TH DRIVE  
STE #108  
CORAL SPRINGS, FL 33065 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: AS ( ) Delete  
Name: MARIN, MIGUEL  
Address: 627 NW 88TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete  
Name: MILLER, STEFANIE  
Address: 7111 SW 42ND COURT  
City-St-Zip: DAVIE, FL 33314

Title: CEO ( ) Delete  
Name: MILLER, DIANNE  
Address: 8901 NW 38TH DR., #108  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP ( ) Delete  
Name: MARIN, LAURIE  
Address: 627 NW 88TH DR  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: AS ( ) Delete  
Name: MARIN, MIGUEL  
Address: 5437 NW 106TH DR  
City-St-Zip: POMPANO BEACH, FL 33076

Title: T ( ) Delete  
Name: MILLER, STEFANIE  
Address: 8650 BRIDLE PATH CT  
City-St-Zip: FORT LAUDERDALE, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANNE E. MILLER

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

Date