FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S24627

(9)

INSTANT GLASS AND MIRROR INC.

FILED
Apr 14 1997 8:00am
Secretary of State



| Principal Place of Business 781 WEST 25TH ST HALEAH FL 33010 | | Mailing Address 781 WEST 25TH ST HIALEAH FL 33010-2150 | | | | | | | |
|--|--|--|-------------|------------|---|--|---------------------|---------------|------------------------|
| | | | | | 3. Date Incorporated or Qualified 01/14/1991 3a. Date of Last Report 05/01/1996 | | | | |
| 2. Principal P | ace of Business | 2a. Mailing | Address | | | 4. FEI Number | | A | pplied For |
| 21 26 | | | | | | 65-0237082 | | N | lot Applicable |
| Suite, Apt | #, etc | Suite, A | pt. #, etc. | | | 5. Certificate of Status Desired | | | Additional Required |
| City & Stat | (c) | City & S | tate | | | 6. Election Campaign Financing | | \$5.00 |) May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | | to Fees |
| Ζip | Country | Zφ | | Country | | 8. This corporation has liability for in | | | s. 199.032, |
| 24 | 25 | 29 | | 30 | | | Yes 🗌 | | |
| | 9. Name and Address of Curr | ent Registered Ag | ent | | | 10. Name and Address of New Reg | latered A | jent | |
| SAB | UGO, MAURÓ V. | | | 81 | Name | | | • | |
| 964 | WEST FLAGLER ST. | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | |
| MIAI | MI FL 33130 | | | " | On our rais | and and an | , | | |
| _ | | | | 83 | | | | | |
| 1 | | | | - | A:- | | | A= 7:- | Code |
| | | | | 84 | City | | FL | 85 Zip | Code |
| SIGNATURE | Englished Typed in provide some of registered a OFFICERS A | AND DIRECTORS | | 13. | ent signature req | uired when reinstating) ADDITIONS/CHANGES TO OFFIC | | | |
| blif | D | | DELETE | 1.1 TITLE | | | [| Change | Addition |
| NAME | SABUGO, MAURO V. | | | 1.2 NAME | | | | | |
| STREET ADDRESS | 8931 S.W. 34TH ST. | | | 1.3 STREE | T ADDRESS | | | | |
| 0017 - \$1 - 20P | MIAMI FL | | | 1.4 CITY- | ST - 2(P | | | | |
| TOLE | D | | DELETE | 2.1 TITLE | | | ι | Change | Addition |
| NAME: | PEREZ, SILVERIO | | | 2.2 NAME | | | | | |
| STREET ADDRESS | 158 EAST 12TH ST. | | | 2.3 STREE | T ADDRESS | | | | |
| CITY - ST - ZIP | HIALEAH FL | | | 2. 4 CITY- | ST-ZIP | | | 10 | 11 2235 |
| TULE | 0 | | DELETE | 3.1 TITLE | | | L | Change | Addition |
| NAME | PEREZ, HECTOR R. | | | 3.2 NAME | | | | | |
| STREET ADDINESS | 2990 S.W. 103RD AVE. | | | 3.3 STREE | ADDRESS | | | | |
| CITY - ST ZIF | MIAMI FL | | - ACLES | 3.4. CITY- | ST-ZIP | A. T. | | Change | Addition |
| 1016 | | | DELETE | 4.1 TITLE | | (m | ₍₄₋ 97) | Creatige | |
| NAME | | | | 4. 2 NAME | | ` , | $\mathcal{M}_{i,i}$ | | |
| STREET ALREADS | | | | | T ADDRESS | (1/-) | 14 | | |
| City St ZiF | | | | 4.4 CITY- | ST - Z/P | | | Chagos | Addition |
| MiE | | | L DELETE | 5.1 TITLE | | | | Change | : Addition |
| NAME | | | | 5 2 NAME | | | | | |
| STREET ADDRESS | | | | 53 STREE | T ADDRESS | | | | |
| [CHY-51 Zir | | | — | 54 CITY- | ST-ZIP | | · | 105 | 6 adis |
| TITLE | | | ☐ DELETE | 6 I TITLE | | 20000214 | 309 | nange | Addition |
| NAME | | | | 62 NAME | | -04/15/97010 | 0303 | 0 | |
| STREET A HORESS | , | | | | T ADDRESS | ***165.00 | | | |
| CDV-S1-762 | | | | 64 CITY- | ST-ZIP | | | | |

14. I do hereby cert by 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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that have an ollicer 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 attachillent with an address.

SIGNATURE:

AND THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

04/07/47 (30)885-1108