SIGNATURE: R E KOLLAR

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

I hereby 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

PRESIDENT

Current Principal Place of Business:

Entity Name: HOMESTEAD GLASS CO.

% ROBERT E. KOLLAR 515 N KROME AVE HOMESTEAD, FL 33030

DOCUMENT# K51758

Current Mailing Address:

% ROBERT E. KOLLAR 515 N KROME AVE HOMESTEAD, FL 33030

FEI Number: 65-0089286

Name and Address of Current Registered Agent:

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KOLLAR, ROBERT E. 515 N KROME AVE HOMESTEAD, FL 33030 US

SIGNATURE: Electronic Signature of 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.

Officer/Director Detail :

Title	D	Title	PST
Name	KOLLAR, ROBERT E	Name	KOLLAR, ROBERT E
Address	515 N KROME AVE	Address	515 N KROME AVE
City-State-Zip:	HOMESTEAD FL	City-State-Zip:	HOMESTEAD FL

Certificate of Status Desired: No

02/06/2015

Date

Date