

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000096201

**Entity Name:** VELEZ AUTOGLASS, INC.

**Current Principal Place of Business:**

5027 PINE BREEZE CT.  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

5027 PINE BREEZE CT.  
WEST PALM BEACH, FL 33415

**FEI Number:** 51-0592265

**Certificate of Status Desired:** No

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

VELEZ, OSCAR M  
5027 PINE BREEZE CT.  
WEST PALM BEACH, FL 33415 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name LOPEZ, ALISA A  
Address 5027 PINE BREEZE CT.  
City-State-Zip: WEST PALM BEACH FL 33415

Title P  
Name VELEZ, OSCAR M  
Address 5027 PINE BREEZE CT.  
City-State-Zip: WEST PALM BEACH FL 33415

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

**SIGNATURE:** OSCAR VELEZ

**PRESIDENT**

**03/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date