

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000092130

**Entity Name:** SHADES OF LUX INC.

**Current Principal Place of Business:**

2970 NW 15 STREET  
MIAMI, FL 33125

**Current Mailing Address:**

2970 NW 15 STREET  
MIAMI, FL 33125 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

HISLOP, LUCY  
2970 NW 15 STREET  
MIAMI, FL 33125 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:** LUCY HISLOP

02/07/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HISLOP, LUCY M  
Address 2970 NW 15 STREET  
City-State-Zip: MIAMI FL 33125

*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:** LUCY HISLOP

PRESIDENT

02/07/2017

Electronic Signature of Signing Officer/Director Detail

Date