FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -1 AM 11:45

DOCUMENT # **666713** **(3)**

1. Corporate Name
MIRROR REFLECTIONS, INC.

Principal Place of Business
8230 KRISTEL CIRCLE
PORT RICHEY FL 34668

Mailing Address
8230 KRISTEL CIRCLE
PORT RICHEY FL 34668

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **04/14/1980**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or — 22
Suite, Apt. # or — 27
City & State — 23
City & State — 28
Zip — 24
County — 25
Zip — 29
County — 30

4. FEI Number: **59-2017079** — Applied For / Not Applicable
5. Certificate of Status Desired: ☑ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ **$5.00** May Be Added to Fees
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
FERNANDEZ, FRANK
9056 ONEAL AVENUE
NEW PORT RICHEY FL 34654

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name / Street Address / City, St, Zip
PTV	FERNANDEZ, FRANK 9056 ONEAL AVENUE NEW PORT RICHEY FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (B.A.)

Title	Name / Street Address / City, St, Zip	Change / Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition
		☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is substantially accurate and complete and, for the corporations listed on the annual report or supplemental annual report, is true and correct and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or have been approved by the board of directors to execute the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of the report or on an attached sheet with an address.

SIGNATURE: Frank Fernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank Fernandez
President
Title

4/15/95 (813) 848-5226
Date Phone #

0373402 CP