

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000000527

FILED  
Feb 03, 2012  
Secretary of State

**Entity Name:** MIRROR IMAGE ENTERPRISES OF FLORIDA, INC.

**Current Principal Place of Business:**

19195 MYSTIC POINTE DR.  
SUITE 2910  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

19195 MYSTIC POINTE DR.  
SUITE 2910  
AVENTURA, FL 33180

**New Mailing Address:**

**FEI Number:** 65-1101019

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

THAL, LUCY  
19195 MYSTIC POINTE DR.  
SUITE 2802  
AVENTURA, FL 33180 US

**Name and Address of New 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.

SIGNATURE:

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: THAL, LUCY  
Address: 19195 MYSTIC POINTE DR., #2910  
City-St-Zip: AVENTURA, FL 33180

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 THAL

P

02/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date