

2004

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90289 045 ***150.00

DOCUMENT # *P 01000039920*

1. Entity Name

THE ART OF THE MIRROR, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

7309 NW 46th Street *7309 NW 46th Street*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

MIAMI FL

MIAMI FL

4. FEI Number

65-1094011

Applied For
Not Applicable

Zip

Country

Zip

Country

33166

33166

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

VANESSA EGUED

Street Address (P.O. Box Number is Not Acceptable)

7309 NW 46th Street

City

MIAMI

FL

Zip Code

33166

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Vanessa Egued *Vanessa Egued*

04-23-04

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*PD
EGUED, MERCEDES
7309 NW 46th Street
MIAMI FL 33166*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*VSD
EGUED, VANESSA
7309 N.W. 46th Street
MIAMI FL 33166*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Vanessa Egued *Vanessa Egued*

04-23-04

305 553-5104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)