## 2003 FOR PROFIT CORPORATION

## Aug 20, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P02000125955 DOCUMENT # 08-20-2003 90052 039 \*\*\*150.00 REFLECTIONS MOBILE CAR WASH & DETAILING, INC Principal Place of Business Mailing Address 3755 NW 23 CT 3755 NW 23 CT MIAMI FL 33142 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARRIS, TOMMIE Street Address (P.O. Box Number is Not Acceptable) 3755 NW 23 CT **MIAMI FL 33142** Zip Code 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** (NOTE: Registered Agent signature required when reinstating) DATE ne of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITEE TITLE Change ☐ Addition ☐ Delete HARRIS, TOMMIE NAME NAME 3755 NW 23 CT STREET ADDRESS STREET ADDRESS **MIAMI FL 33142** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ■ Addition

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 Block 11 if of the corporation or the receiver or trustee empowered to execu changed, or on an attachment with an address, with all other like

NAME

STREET ADDRESS

CITY-ST-7IP

NAME

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August 17, 2003 Lef Reflections Mobile Car Moster Detailing Lie P02008 120900 377 N.W. 23 Cf. Mia . Fla. 33/42 Livino of Conforations Tallabassel, Fla. Gentleman: a per notice received from your office requesting \$500.00 for my capora.

tion awal deposit I want to surfam, that I never received a finan ratice concerning never received a finan surfirst time in this payment, this is my first time in lusiness and I had no leasalledge of this lusiness and I had no leasalledge of this report I appreciate my fewalters to be mained report I appear that you help happen again, thoulso for your help. Succeedy, Tommie Herris

attach ment