2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 12, 2005
Secretary of State

DOCUMENT# P04000054408

Entity Name: REFLECTIONS FLOORING, INC.

Current Principal Place of Business:

444 HEMLOCK STREET
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

1713 TALL PINE CIR.
APOPKA, FL 32712 US

Current Mailing Address:

444 HEMLOCK STREET
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

1713 TALL PINE CIR.
APOPKA, FL 32712 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAYORGA, AUGUST C
200 NORTH DENNING DRIVE
SUITE 5
WINTER PARK, FL 327893736 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MARTINEZ, JOSE E
Address: 444 HEMLOCK STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VPS ( ) Delete
Name: RAMIREZ, ARLEN F
Address: 444 HEMLOCK STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VP ( ) Delete
Name: YEPEZ, RICARDO D
Address: 1981 AMERICANA BLVD, APT #48-K
City-St-Zip: ORLANDO, FL 32839 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ARLEN RAMIREZ PRES 09/12/2005
Electronic Signature of Signing Officer or Director Date