Po5000027542

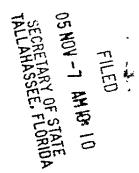
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	» #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Division of Corporations
SUBJECT: REFLECTIONS GLASS AND LUTERIORS INC (Name of Corporation)
DOCUMENT NUMBER: Po 5000027542
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
REFLECTIONS CLASS AND INTERIORS INC (Firm/Company)
300-50 INDUSTRIAL PARK BLVD
SEBASTIAN F 32958 (City/State and Zip Code)
For further information concerning this matter, please call:
Guen V. Landers EA at (772) 770-2200 (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FORIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: REFLECTIONS GLASS AND INTERIORS INC
2. The principal office address: 300-50 INDUSTRIAL PARK BLVD
SEBASTIAN FL 32958
3. The mailing address (if different): Same as Hem 2
4. Date of incorporation/qualification: 02 22 05 Document number: P0500027542
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
G.W. HEDMAN
108 W. NEW HAVEN AVENUE
MELBOURNE FL 32901
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Touy Scott
300.50 INDUSTRIAL PARK BLVD FOR B
SEBASTIAN F. 32958
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) STEPHANIE J. SCOTT, VP (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) Nov 1, 2005 (Date)
If signing on behalf of an entity:
Tony Scott
(Typed or Printed Name) * * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314