

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027542

FILED
Feb 18, 2009
Secretary of State

Entity Name: REFLECTIONS GLASS AND INTERIORS INC.

Current Principal Place of Business:

300-50 INDUSTRIAL PARK BLVD
SEBASTIAN, FL 32958

New Principal Place of Business:

Current Mailing Address:

300-50 INDUSTRIAL PARK BLVD
SEBASTIAN, FL 32958

New Mailing Address:

FEI Number: 20-2886467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, TONY
300-50 INDUSTRIAL PARK BLVD
SEBASTIAN, FL 32958 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: PD () Delete
Name: SCOTT, TONY
Address: 300-50 INDUSTRIAL OARK BLVD
City-St-Zip: SEBASTIAN, FL 32958

Title: SD () Delete
Name: SCOTT, STEPHANIE J
Address: 300-50 INDUSTRIAL PARK BLVD
City-St-Zip: SEBASTIAN, FL 32958

Title: D () Delete
Name: MITCHELL, KENNETH
Address: 300-50 INDUSTRIAL PARK BLVD.
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SCOTT, STEPHANIE J
Address: 300-50 INDUSTRIAL PARK BLVD
City-St-Zip: SEBASTIAN, FL 32958

Title: SEC (X) Change () Addition
Name: SCOTT, DAVID
Address: 300-50 INDUSTRIAL PARK BLVD.
City-St-Zip: SEBASTIAN, FL 32958

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TONY SCOTT

PRES

02/18/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date