

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000123955

FILED
Apr 23, 2007
Secretary of State

Entity Name: MIRROR IMAGE SURFACE & RESTORATION, INC.

Current Principal Place of Business:

8348 TECUMSEH CIRCLE
PORT CHARLOTTE, FL 33981

New Principal Place of Business:

502 COUNTRYSIDE DRIVE
NAPLES, FL 34104

Current Mailing Address:

8348 TECUMSEH CIRCLE
PORT CHARLOTTE, FL 33981

New Mailing Address:

502 COUNTRYSIDE DRIVE
NAPLES, FL 34104

FEI Number: 14-1995852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

BROOMFIELD, DWAYNE
502 COUNTRYSIDE DRIVE
NAPLES, FL 34104 US

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: DWAYNE BROOMFIELD

04/23/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LASPROW, RICHARD
Address: 8348 TECUMSEH CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROOMFIELD, DWAYNE
Address: PO BOX 7552
City-St-Zip: NAPLES, FL 34101

I hereby certify that the information supplied with this filing does not qualify for the 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: DWAYNE BROOMFIELD

PRES

04/23/2007

Electronic Signature of Signing Officer or Director

Date