## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

ANNUAL REPORT				Jan 19, 200 / US:00			
DOCUMENT # P93000020812  1. Entity Name MIRROR DECOR INC.				,	5	ecretary	oi Sta
, which core	DE001( 1140.						
Principal Plac 6666 SUNSE SUNRISE, FL	ET STRIP	Mailing Address 6666 SUNSET STRIP SUNRISE, FL 33313	•				
,							
DO NOT WRITE IN THIS SPA				01092007 No Chg-P CR2E034 (11/05)			
			CE	4. FEI Numb		CR2E034 (11/	Applied For
				65-039 5. Certificate	95618 e of Status Desired	□ \$8.75	Not Applicable Additional
	6. Name and Address of Current R	egistered Agent		<u> </u>		1 00 1101	in or
GLEASON, THOMAS 6666 SUNSET STRIP SUNRISE, FL 33313			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for tions of routs are agent.  Sprature: typed or printed name of registered agent and	lase-	red office or register		oth, in the State of Fi	orida. I am familiar v	with, and accept
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.				.00 May Be ed to Fees			
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GLEASON, THOMAS 6666 SUNSET STRIP SUNRISE, FL	RECTORS			<u> </u>		
NAME STREET ADDRESS CITY+ST-ZIP	AAME BRATTON, PAMELA STREEI ADDRESS 7321 NW 16TH ST.				<b>U0000</b> 01/22/07	0592730 -80005-011	150.00
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	/RITE	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE			1				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachped, with an address, with all other like empowered.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/07 954 748 9367 Date Dayline Phone 4