FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000021413 (7)

ELEGANT MIRRORS, INC.

265 NW 1ST STRET

DEERFIELD BEACH FL 33441

Principal Place of Business Mailing Address												
			265 NW 1ST STRET DEERFIELD BEACH FL 33441-3313			İ						
						.	 Date Incorporated or Qualified 03/17/1994 		ite of La 22/19(st Repor	rt .	
2. Principal Pla 21	ace of Business	2a. Mailing Address				[d For oplicable		
Suite, Apt. #, etc.		Suite, Apt. #				5. Certificate of Status Desired	1 + +			Additional		
City & State		28					Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip 24	Country Zip 29 3			Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
g. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
KEL	LEY, CHRISTOPHER P			81	Nan	ne						
8801 BISCAYNE BLVD.				82 Street Ad			s (P.O. Box Number is Not Accept	bie)	·			
STE	. 101				0							
MIAI	VII FL 33138			83								
				84	City	<u> </u>		FL	85	Zip Code	8	
office or re	o the provisions of Sections 607 egistered agent, or both, in the S n familiar with, and accept the o	State of Florida. Such cha	nge was authoriz	ed by	the c	ed corpora corporation	ation submits this statement for the 's board of directors. I hereby acc	purpose of apt the app	changi ointmen	ng its re t as regi	gistered istered	
SIGNATURE	Signature Typed or printed trame of registers	and the department of	MOTE: Booista		-1	a a recovired o	when reinstating)	DATE				
		AND DIRECTORS	(NOTE Registe		ent signa	aure required w	ADDITIONS/CHANGES TO OFF		DIDEC	TODG IN	1.12	
12.	D		DELETE 11				AUDITIONS/UNAINGES TO UFF	IUCHO ANL	Char		Addition	
NAME	KELLER, HENRY A JR.			1.2 NAME					J. 10.	٠,- ١		
444 1811 14 AMERICA					1.3 STREET ADDRESS							
DEFORM D. DEAOUT FL. BOALA					1.4 CITY-ST-ZIP							
TITLE	DECIMIED DESCRIPTE SO			TITLE	>1 - ZIF			,,	Char	nge T	Addition	
NAME	MARZANO, PETER M JR.	.		NAME					-			

2.3 STREET ADDRESS

3.3 STREET ADDRESS 3.4. CITY-ST-ZIP

4.3 STREET ADDRESS 44 CITY-ST-ZIP

53 STREET ADDRESS

5.4 City-St-ZiP

2. 4 CITY - ST - ZIP

3.1 TITLE 3.2 NAME

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME

61 TITLE

62 NAME 6.3 STREET ADDRESS

DELETE

DELETE

__ DELETE

DELETE

64 CITY-ST-ZIP CITY-ST-7/P 14. I do hereby certify that the information superied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual country is annual 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 co-poration or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 1.

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

CITY - ST - ZIP

CITY-S1-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

Change

Change

Change

Addition

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Addition

FILED

Jan 28 1997 8:00am

Secretary of State