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

## Jan 22 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State

,	1998 DIVISION OF CORPORATIONS					or state
	MENT # P9500 E'S REFLECTIONS, INC.	00014319 (4	)			
Principal Place of Business Mailing Address					f tadicadi sia inidi nitti adili nalit 84jil 0011	LI ESRIA BIRDA SITAT ITATA TATI TRAF
3375 BUCKINGHAM TR 3375 BUCKINGHAM TR						
VERO BEACH FL 32960 VERO BEACH FL 329			ı		DO NOT WRITE IN THIS SPACE	
					<ol> <li>Date Incorporated or Qualified</li> <li>02/20/1995</li> </ol>	
2. Principal Place of Business 21		2a. Mailing Address 26	26		4. FEI Number  NOT APPLICABLE	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State		6 Flation Compains Financing	Fee Required	
23		26		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent		Name	10. Name and Address of New Register	ed Agent
	NDIT, DIANE K		ļ	Name		
	75 BUCKINGHAM TR		8	Street A	ddress (P.O. Box Number is Not Acceptable)	
VE	RO BEACH FL 32960		8	3		
		-				
			8	4 City	F	85 Zip Code
11. Pursuant to office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Starm familiar with, and accept the obtains	02 and 607.1508, Florida Statule of Florida. Such change was gations of Section 607.0505.	ites, the abo authorized lorida Statut	ove-named corporates	corporation submits this statement for the purpos oration's board of directors. I hereby accept the	e of changing its registered appointment as registered
SIGNATURE	Tarrina William and addept in a deli	gations of odolor oot looo, i	ionica otata	.00.		
	Signature, typed or printed name of registered a		TE: Registered A	lgont signature re	equired when reinstating) DAT	
12.	OFFICERS AI	ND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12  Change Addition
NAME	CONDIT, ROBERT D.S.	☐ DECENT	1.7 H/C			C change C Addition
STREET ADDRESS	AATT #140444444444004 FR			ET ADDRESS		
CITY-ST-ZIP	VERO BCH. FL 32960			- ST- ZIP		i
TITLE	PS PS	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	CONDIT, DIANE K		2.2 NAM	E		
STREET ADDRESS	3375 BUCKINGHAMMOCK 1	TR.	2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	VERO BCH. FL 32960	Delete		(-ST-ZIP		
TITLE		☐ DELET <b>e</b>	3.1 TiTLE 3.2 NAM	Y		☐ Change ☐ Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	4 1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAN	AE		1
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME CTREET ADDRESS			5.2 NAM	- 1		
STREET ADDRESS				ET AODRESS		
TITLE		DELETE	5.4 CITY 6.1 TITLE			☐ Change ☐ Addition
NAME		— ··-	6.2 NAM			• • • • • • • • • • • • • • • • • •
STREET ADDRESS				ET ADDRESS		1
CITY-ST-ZIP			6.4 CITY		<u>,</u>	
	ertify that the information supplied	with this filing does not qualify			in Section 119.07(3)(i), Florida Statutes, I further	certify that the information

indicated on this annual report or supplied with this ming does not quality for the exemption stated in Section 119.07(3)(j). Florida Statutes, internet before that the indicated on this annual report or supplemental 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 corporation or the receiver of treatee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

**FILED**