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 # P95000080053 (8)

MIRRORS BY OSCAR, INC.

2075 B NW	tane of Business / 1ST PLACE ON FL 33431	Mailing Address 2075 B NW 1ST PLACE BOCA RATON FL 3343				
DOOR NAME	01112 00101				3. Date Incorporated or Qualified 10/16/1995	3a, Date of Last Report 05/01/1996
2 Principa	al Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Z(p	Country	Zíp	Coun	try	8. This corporation has liability for	intangible tax under s. 199.032,
24	25 9. Name and Address of Curren	29 nt Registered Agent	30		Florida Statutes 10. Name and Address of New R	
	(OPSON, JOHN	K HOBIECOU HBOIK		1 Name	,,,	
	7300 WEST CAMINO REAL, #126					LI.S
	BOCA RATON FL 33433		1	Street A	ddress (P.O. Box Number is Not Accepta	ible)
"	JOOA HATON 1E GOTGO		Ē	3		
				4 City		85 Zip Code
				City		FL 85 Zip Code
11. Pursua	ant to the provisions of Sections 607.050	2 and 607.1508, Florida Sta	atutes, the abo	ove-named c	orporation submits this statement for the oration's board of directors. I hereby acce	purpose of changing its registered
onice agent.	or registered agent, or both, in the State . I am familiar with land accept the obligi	ations of, Section 607.0505.	as aumonzeu , Florida Statu	by the corpo tes.	region's board of directors. Thereby acce	spi the appointment as registered
SIGNATUR	31					
	Signature, typed or printed name of registered age			Agent signature re	quired when reinstating)	DATE CTOPO III I
12.	OFFICERS ANI	D DIRECTORS DELETE	13. 1.1 TITL	<u> </u>	ADDITIONS/CHANGES TO OFF	Change Addition
1)ILE	OSCAR, BARAHONA	C) DELLETE	1.2 NAN			
NAME CENTER LENDRE	ACCO O LULITADY TO #400			EET AODRESS		
STREET ADDRE	DEERFIELD BCH. FL 33442			-ST-ZIP		
CITY - ST - ZIF	S	DELETE	21 T(FL			Change Addition
NAME	BARAHONA, SYLVIA		2.2 NAM			
STREET ADDRE	AAAA O MINITADY TO AAAA		2.3 STR	EET ADDRESS		
CITY - ST - ZIP	DEERFIELD BCH. FL 33442		2. 4 CIT	Y-ST-ZIP		
TITLE		DELETE	3.1 TITL			Change Addition
NAMÉ	,		3.2 NAN	IE		
STREET ADDRE	ESS		3.3 STR	EET ADORESS		
CHTY - ST - 7IP		· · · · · · · · · · · · · · · · · · ·	3.4. CIT	Y-ST-ZIP		
TITLE		L_ DELETE	4.1 TITE	£		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRE	ESS		4.3 STA	EET ADORESS		
D:17 - S1 - ZiP		D brieff.		r-ST-ZIP		Change Addition
TITLE		☐ DELETE	5.1 Till			The results The volument
NAME			5.2 NAM			
STREET ADDRE	ESS			EET ADDRESS		
CITY-ST-ZIP		DELETE		/-\$T-ZIP		Change Addition
TITLE		r" neces	6.1 T/TL 6.2 NA)	j		Lij Ondrige Lij Audrildi
NAME STREET ANTIRE	1			FET ADDRESS		

SIGNATURE:

64 CITY-ST-ZIP 14. I do hereby certify that the information supplied 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 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 if chapted, or on an attachment with an address.

3/21/97

FILED

Mar 31 1997 8:00am

Secretary of State