

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000011987

Entity Name: A REFLECTION OF ME, INC.**Current Principal Place of Business:**186 NW 88 ST
EL PORTAL, FL 33150**Current Mailing Address:**186 NW 88 ST
EL PORTAL, FL 33150 US**FEI Number:** 82-3687540**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TIMOTHEE, LEONIE
186 NW 88 ST
EL PORTAL, FL 33150 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:** LEONIE TIMOTHEE

05/01/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRPERSON
Name PHILIPPE CORIOLAN, ROSE
Address 8620 NW 15TH ST
City-State-Zip: PEMBROKE PINES FL 33024

Title TREASURER
Name JEAN, MIKE
Address 186 NW 88 ST
City-State-Zip: EL PORTAL FL 33150

Title SECRETARY
Name BOUCARD, AULDITH
Address 2551 NE 182ND ST
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title ARTISTIC DIRECTOR
Name MATHIAS, ISAIE
Address 18520 NORTHWEST 67TH AVENUE
166
City-State-Zip: MIAMI FL 33015

Title EXECUTIVE DIRECTOR
Name TIMOTHEE, LEONIE
Address 186 NW 88 ST
City-State-Zip: EL PORTAL FL 33150

Title ASST. SECRETARY
Name SAINT LOUIS, BELYNDA
Address 18520 NW 67TH AVE
166
City-State-Zip: MIAMI FL 33015

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LEONIE TIMOTHEE**EXECUTIVE DIRECTOR**

05/01/2023

Electronic Signature of Signing Officer/Director Detail

Date