

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000158878

**Entity Name:** MIRAGE HOME STAGING, LLC

**Current Principal Place of Business:**

3353 WESTCHESTER SQUARE BLVD.  
APT 102  
ORLANDO, FL 32835

**Current Mailing Address:**

3353 WESTCHESTER SQUARE BLVD.  
APT 102  
ORLANDO, FL 32835 US

**FEI Number:** 83-1091596

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ECHAVIA, GLORY ROSE M  
3353 WESTCHESTER SQUARE BLVD.  
APT 102  
ORLANDO, FL 32835 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            ECHAVIA, GLORY ROSE M  
Address        6149 METROWEST BLVD.  
City-State-Zip: ORLANDO FL 32835

Title            VP  
Name            CIRINEO, MARK G  
Address        6149 METROWEST BLVD. UNIT 102  
City-State-Zip: ORLANDO FL 32835

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GLORY ROSE ECHAVIA

**PRESIDENT**

**03/01/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date