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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9800000754

DECK HOLDINGS - FLORIDA, INC.

Principal	Place of	of Busin	ess

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90038 019 ***150.00



Principal Place of Business Mailing Address						
3098 PIEDOMONT RD., STE 490 3098 PIEDOMONT RD., STE 490						
ATLANTA GA 3		ATLANTA GA 30305				
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 02/06/1998
	lace of Business	2a. Mailing Address			~]	4. FEI Number Applied For
21 3098 Piedmont Rd 26 3098 Piedmont Rd			- Ra	APPLIED FOR 58-236 9568 Not Applicable		
Suite, Apt.	f etc Suite Ant # etc				5. Certificate of Status Desired \$8.75 Additional	
22	490 27 490			Fee Required		
City & Stat		City & State			6. Election Campaign Financing \$5.00 May Be	
	lanta GA	28				Trust Fund Contribution Added to Fees
Zip	Country	Zip Country			8. This corporation owes the current year Intangible	
24	25	29 3	0			Personal Property Tax.
	9. Name and Address of Current	Registered Agent		81 N		10. Name and Address of New Registered Agent
COD	PORATION SERVICE COMPANY			ין ויס	Name	
-),	82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)
	HAYS STREET		<u> </u>		_	
IALL	AHASSEE FL 32301-2525			83		
			Ţ	84 (City	FL 85 Zip Code
		1007.4500.51 11.01.11				
l office or r	egistered agent, or both, in the State of	f Flonda. Such change was auti	norized	by the	e corporation	oration submits this statement for the purpose of changing its registered in's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statu	tes.		
SIGNATUBA	NIA					
U - '	Signature, typed or printed name of registered agent		•	Agent sig	gnature required	when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD OFFICERS AND	DELETE	13.	F	i	Change Addition
i	EICHENBLATT, DAVID	D percit	1.2 NAM			
NAME	3098 PIEDMONT RD, STE 490				ADDECC.	
STREET ADDRESS			i i	CA TEE		
CITY-ST-ZIP	ATLANTA GA	☐ DELETE	1.4 CII	Y-ST-ZI	IP	☐ Change ☐ Addition
TITLE	D CONTRACTOR					
NAME	KAUFMAN, CRAIG		2.2 NAA			
STREET ADDRESS	3098 PIEDMONT RD, STE 490			CA TEE		
CITY-ST-ZIP	ATLANTA GA			Y-ST-Z	ziρ	☐ Change ☐ Addition
TITLE	S	☐ DELETE	3.1 TITL			Change Addition
NAME	BLOCK, MARY S		3.2 NA	ΛE		
STREET ADDRESS	3098 PIEDMONT RD, STE 490		3.3 STP	REET AD	ORESS	
CITY-ST-ZIP_	ATLANTA GA			Y-ST-Z	ZIP	
TITLE		☐ DELETE	4.1 TITL	Æ		Change Addition
NAME			4. 2 NA	ME		
STREET ADDRESS			4.3 STP	REET AD	ORESS	
CITY-ST-ZIP			4.4 CIT	Y-ST-ZI	IP.	
TITLE		☐ DELETE	5.1 TITU			☐ Change ☐ Addition
NAME			5.2 NAM	Æ		
STREET ADDRESS			5.3 STR	REET AD	DRESS	
CITY-ST-ZIP				Y-ST-ZI	IP	<u> </u>
TITLE		☐ DELETE	6.1 TITL	E		☐ Change ☐ Addition
NAME			6.2 NAM	ΜE		
STREET ADDRESS			6.3 STR	REET AD	DORESS	
CITY-ST-ZIP			6.4 CIT	Y-ST-ZI	IP	

14. I 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 13 if changed, or on an attachment with an address, with all other like empowered.

HIGHATURE AND TYPED OR PRINTED NAME OF SIGNAMS OFFICER OR DIRECTOR