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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name J15381

G. VIENS DECORATING, INC.

Principal Place of Business	Mailing Address
1162 WESTWOOD DR LUTZ FL 33549	1162 WESTWOOD DR LUTZ FL 33549

FILED Feb 11, 1999 8:00am **Secretary of State**

02-11-1999 90012 025 ***150.00

Principal Place	e of Business	Maili	ing Address					i iddittä dini jisat nitan isini ji	1185 1181 6 1811	#1#44 #1#41 #4#11	BIBIT 61811 1665
1162 WESTWO	OD DR	1162	WESTWOOD DR					•			
LUTZ FL 33549 LUTZ FL 33549								_			
								DO NOT WRI		SPACE	
								3. Date Incorporated or Qualifed 05/21/1986			
		1.27	4 10 . 6 4-1					4. FEI Number	*		-lied Cor
	lace of Business	— <u></u>	Mailing Address								plied For
21		26					-	59-2679525			ot Applicable
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired
City & State	re '		City & State					6. Election Campaign Financing		\$5.00	May Be
23		28	,			•		Trust Fund Contribution			to Fees
Zip	Country		Zip	Со	untry			8. This corporation owes the cur	ent vear In	tangible	
24	25	29	•	30			- 1	Personal Property Tax.		Yes	□No
24	9. Name and Address of Cur		red Agent	100				10. Name and Address of New	Registered	Agent	_
	3. Italio dila ridarese el est				81	Name			- .		
VIEN	ns, gary										
	2 WESTWOOD DR				82	Street	Address	s (P.O. Box Number is Not Accept	abie)		
LUTZ	Z FL 33549				83					HARAGE.	40
					84	City		**************************************		85 Zip	Code
					1 1				<u> </u>	<u> </u>	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607	7.1508, Florida Statut	es, the	above	e-named	corpora	ition submits this statement for the	purpose o	r cnanging នេ intment as re	registered
office or n	registered agent or both in the Sta	ate of Florida	Such change was a	umorize	ea by '	tne corpo	corpora oration's	ation submits this statement for the s board of directors. I hereby acce	purpose of	intment as re	registered egistered
office or re agent. I a	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida	Such change was a	umorize	ea by '	tne corpo	corpora oration's	ation submits this statement for the s board of directors. I hereby acce	purpose o pt the appo	r changing its intment as re	registered egistered
office or n	registered agent, or both, in the Sta im familiar with, and accept the obl	ate of Florida. ligations of, S	. Such change was a Section 607.0505, Flo	iutnorize orida Sta	ea by itutes.	tne corpo	orations	nen reinstating)	DATE	THE THE TENTE OF T	gistered
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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.

SIGNATURE: