## 2001 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # POY OCO ID 6448 2007 SEP 24 PM 4: 24 ART life Decoration, Inc. Principal Place of Business Mailing Address 2. Principal Place of Business 3. Mailing Address 9 Ave 19 Ave 1081 SW <u>1801 SW</u> Suite, Apt. #, etc. 01172006 Chg-P CR2E034 (11/05) 4. FEI Number 20 - 1642 40 2 City & State City & State Applied For LIVAMAR Ħ MIYAMAR Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33025 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RIOS Street Address (P.O. Box Number is Not Acceptable) 119 8. 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. I am familiar with, and accept the obligations of registered agent 9-03-09 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition Ana M. Rios NAME NAME 400110061824 09/28/07--01055--019 \*\*\*30 1801 SW 119 AVE MIKAMAR, FL 33075 STREET ADDRESS STREET ADDRESS \*\*300.00 CITY-ST-ZIP CHY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE Oelete THLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition THEF Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition THLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. CER OR DIRECTOR

## ART LIFE DECORATION, INC. 1801 SW 119 AVE MIRAMAR, FL 33025 (954)-270-4937

September 03, 2007

To Whom It May Concern:

This is a brief letter stating that I did not receive any postcard or notice reminding me of the Uniform Business Report of my company Art Life Decoration, Inc. with Document # P04000106448. Along with this letter you will find a check in the amount of \$300.00 and my Uniform Business Report for the years of 2006 and 2007.

If you need further assistance please feel free to contact us. Thank you in advance for your help.

Sincerely,

Ana M. Rios