2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 290994

Address:

City-St-Zip:

Entity Name: ABLE DECORATING SERVICE INC

FILED Aug 19, 2003 Secretary of State

•					
Current Principal Place of Business:			New Principal Place of Business:		
11064 41 (WEST PA	CT N. LM BEACH, F	L 33411			
Current Mailing Address:			New Mailing Address:		
11064 41 (WEST PA	CT N. LM BEACH, F	L 33411			
FEI Number	: 59-1089223	FEI Number Applied For ()	FEI Number Not App	licable()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and	Address of I	New Registered Agent:
	CT N. LM BEACH, F		surnose of changing i	ts registered (office or registered agent, or both,
	e of Florida.	submits this statement for the p	dipose of changing i	is registered t	office of registered agent, or both,
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent		Date
	mpaign Financir S AND DIREC	g Trust Fund Contribution(). CTORS:	ADDITION	IS/CHANGES	TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	P (BEAVER, JAM 11064 41 CT N W. PALM BCH	I.	Title: Name: Address: City-St-Zip:	P (X NANCY BEAVE 11064 41 CT N W. PALM BCH	١. ´
Title: Name: Address: City-St-Zip:	V (KATLIN, GAIL, 2349 SANCTU FT LAUDERDA		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST (BEAVER, NAN 11064 41 CT N W PALM BCH,	I	Title: Name: Address: City-St-Zip:	() Change ()Addition
Title:	() Delete	Title:	D () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

8372 S.E. SUNSET ST.

HOBE SOUND, FL 33455

SIGNATURE: NANCY BEAVER P 08/19/2003