2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 360240

1. Entity Name
DECOTAC, INC.

Principal Place of Business	Mailing Address
7715 NW 74TH AVENUE MIAMI, FL 33166 US	2421 N. BAY ROAD MIAMI BEACH, FL 33140-4262 US

DO NOT WRITE IN THIS SPACE

02032005   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
59-1285189		Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22ND STREET
4TH FLOOR
MIAMI, FL 33145

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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.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	RODRIGUEZ, JULIETA R
STREET ADDRESS	2421 N BAY RD
CITY-ST-ZIP	MIAMI BEACH, FL
TITLE	PD
NAME	RODRIGUEZ, JOSE W.
STREET ADDRESS	2421 N. BAY RD.
CITY-ST-ZIP	MIAMI BCH., FL
TITLE	VPD
NAME	RODRIGUEZ, AIDA A.
STREET ADDRESS	2421 N ABY RD
CITY-ST-ZIP	MIAMI BEACH, FL 62
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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.

SIGNATURE: _Jose W. Rodriguez_   President   2/3/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #