..FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G54028** **(7)**

1. Corporation Name
DECOR MEISTER, INC., USA

Principal Place of Business
50 NW 19TH ST
MIAMI FL 33136-1311

Mailing Address
50 NW 19TH ST
MIAMI FL 33136-1311

3. Date Incorporated or Qualified **08/08/1983**

3a. Date of Last Report **04/20/1995**

4. FEI Number **59-2311805** [ ] Applied For [ ] Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

8. This corporation has subject to intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

2. Principal Place of Business
21 Street Address
22 City, & State
23 Zip 24 County 25

2a. Mailing Address
26 Street Address
27 City, & State
28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
TALVITIE, HEIKKI J.
50 NW 19TH ST
MIAMI FL 33136

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City, **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.0506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of such position, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	RADER, KARL E.	
STREET ADDRESS	7350 LOCH NESS DR	
CITY, ST, ZIP	MIAMI LAKES FL	
TITLE	VD	[X] DELETE
NAME	STAMPFL, SIEGHART	
STREET ADDRESS	6953 SEA GRAPE TERRACE	
CITY, ST, ZIP	MIAMI LAKES FL	
TITLE	VD	[ ] DELETE
NAME	TALVITIE, HEIKKI	
STREET ADDRESS	50 NW 19TH STREET	
CITY, ST, ZIP	MIAMI FL	
TITLE	STD	[ ] DELETE
NAME	RADER, DAGMAR	
STREET ADDRESS	50 NW 19TH ST	
CITY, ST, ZIP	MIAMI FL	
TITLE	VD	[ ] DELETE
NAME	YOUNG, RACHEL	
STREET ADDRESS	7630 N.W. 16TH ST.	
CITY, ST, ZIP	PEMBROKE PINES, FL 33024	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change	[ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY, ST, ZIP		
21 TITLE	[ ] Change	[ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
31 TITLE	[ ] Change	[ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
41 TITLE	[ ] Change	[ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
51 TITLE	[ ] Change	[ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
61 TITLE	[ ] Change	[ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information contained herein, including any additions, forms the 1 and does not qualify for the exemption stated in Section 119.07(3)(k), 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 a 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 attached sheet with an addition.

SIGNATURE: DAGMAR R RADER 2/8/96 576-0271

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Phone #

CR2E034 (12/95)