

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H72022

FILED
Mar 10, 2007
Secretary of State

Entity Name: EXECUTIVE ACCESSORIES, INC.

Current Principal Place of Business:

1072 NW 53 STREET
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

1072 NW 53RD ST
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 59-2594915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARNELL, LEDFORD A., JR.
1515 UNIVERSITY DRIVE
STE 230
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: DECKER, SIDNEY,
Address: 2122 N.W. 91ST LANE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: T () Delete
Name: DECKER, DIANE,
Address: 2122 N.W. 91ST LANE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: S () Delete
Name: DECKER, NATALIE
Address: 3529 SALLY PARRISH ROAD
City-St-Zip: VALRICO, FL 33594 US

Title: T () Delete
Name: DECKER, TIMOTHY
Address: 8801 NW 38 DR-#205
City-St-Zip: CORAL SPRINGS, FL 33065 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

SIGNATURE: DIANE DECKER

VP

03/10/2007

Electronic Signature of Signing Officer or Director

Date