FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J80256

(7)

T DALACE DECENICATIONS INC

Principal Place of Business Mailing Address 1929 NE 164TH ST 1929 NE 164TH ST NORTH MIAMI BEACH FL 33162-4118						
		•		3. Date Incorporated or Qualified 06/26/1987	3a. Date of Last Report 05/01/1996	
2. Principal	2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For	
21	A Dr. Car	26		59-2828910	Not Applicable	
Suite, Ap	毛 弁, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & St	ate	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	· · · · · · · · · · · · · · · · · · ·	or intangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	Yes No	
	9, Name and Address of Cu	rrent Registered Agent		10. Name and Address of New i	Registered Agent	
	attaglia, James		81 Nan	nê		
	29 NE 164TH STREET		82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)		
NO	NORTH MIAMI BEACH FL 33162					
			83			
			84 City		FL 85 Zip Code	
agent. I				ed corporation submits this statement for the orporation's board of directors. I hereby acc	DATE	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTORS IN 12	
THILE	DP LANGE	☐ DELETE	, 1.1 TITLE		☐ Change ☐ Addition	
NAME	BATTAGLIA, JAMES		1.2 NAME			
STREET ADDRES			1.3 STREET ADDRES	is		
CHY-SF-ZIP	N MIAMI BCH FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition	
TOLE NAME	BATTAGLIA, ANTHONY	□ nerete	2 TITLE 22 NAME		Fill cuspide Fill yand(0))	
STREET ADDRES	4000 NE 404 OT		2.3 STREET ADDRES	2		
CHY-SI-2iP	N. MIAMI BCH FL		2.4 CITY-ST-ZIP	~		
11111	DST	DELETE	3.1 TITLE		Change Addition	
NAME.	BATTAGLIA, JAMES	_	3.2 NAME			
STREET ADDRES	1929 NE 164 STES		3 3 STREET ADDRES	s		
CHY St Zin	N. MIAMI BCH FL		34. CITY-ST-ZIP			
1111.1	VP	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAMI	LEWIS, DONALD A.		4. 2 NAME			
STREET ADORES			4.3 STREET ADDRES	as		
CHY-S1-ZIP	NORTH MIAMI BEACH FL		4.4 CITY-ST-ZIP			
THEF		DELETE	5.1 TITLE		Change Addition	
NAMI			5.2 NAME			

14. I do 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 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 the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 in chapter 607, or on an algorithm with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY - ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

0/1Y-S1-7/2

City-\$1-ZiP

TITLE

NAME STREET ADDRESS

DELETE

Change

☐ Addition

FILED

Apr 11 1997 8:00am

Secretary of State