

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90019 007 ***143.75

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DOCUMENT # L03000021768 1. Entity Name DECORATION SERVICES, LLC					
Principal Place of Business 1280 N.W. 22ND ST. POMPANO BEACH, FL 33069				Mailing Address 1280 N.W. 22ND ST. POMPANO BEACH, FL 33069	
2. Principal Place of Business - No P.O. Box # 2000 Banks Road		3. Mailing Address 2000 BANKS ROAD			
Suite, Apt. #, etc. SUITE 212		Suite, Apt. #, etc. SUITE 212			
City & State MARGATE, FL		City & State MARGATE FL			
Zip 33063		Country USA.		Zip 33063	
Country USA.		Country USA.			
4. FEI Number 16-1366604				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BRANDANO, JOHN D 1280 N.W. 22ND ST. POMPANO BEACH, FL 33069				7. Name and Address of New Registered Agent Name BRANDANO, JOHN D. Street Address (P.O. Box Number is Not Acceptable) 2000 BANKS ROAD, SUITE 212 City MARGATE FL Zip Code 33063	
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 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE 4/29/08	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANDANO, JOHN D 1280 NW 22ND ST POMPANO BEACH, FL 33069	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANDANO, JOHN D. 2000 Banks Road, STE 212 MARGATE, FL 33063	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANDANO, PATRICK J 1280 NW 22ND ST POMPANO BEACH, FL 33069	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(No Change) 2000 Banks Road, Suite 212 MARGATE, FL 33063	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:				DATE: 4/29/08 DAYTIME PHONE: 954-956-7266	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					