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 #

(1)

HAUT DECOR, INC.

Principal Place of Business

Mailing Address

FILED								
May 05 1997 8:00am								
Secretary of State								



180 NE 99TH ST. SUITE 221 MIAMI FL 33137 US		180 NE 39TH ST. SUITE 321 MIAMI FE 33137-3650			3. Date Incorporated or Qualified 3a. Date of Last Report 01/18/1990 08/08/1996			
	lace of Business	2a, Mailing Address			4, FEI Number	<u> </u>		Applied For
Sulte, Apt. #, etc.		26 P.O. Box 371369 Suite, Apt. #, etc.			65-0225108	Not Applicable		
22 ·		27		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	8	City & State 28 Mi Ami, FL			Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zip 24	Country 25		Country 30 9	JSA		Yes 🔼	No	er s. 199.032,
	g. Name and Address of Current	t Registered Agent			10. Name and Address of New Reg	istered A	gent	
	DEGUER, JANET		61	Name				
180 NE 39TH ST. SUITE 221			82	82 Street Address (P.O. Box Number is Not Acceptable)				
MIAI	VI FL 33137		83					
			84	City		FL	85	Zip Code
office or r	egistered agent, or both, in the State in familiar with, and accept the obligation of registered agents agents.	of Florida, Such change was autions of, Section 607,0505, Flori	rthorized by ida Statute	y the corpora s.	poration submits this statement for the pation's board of directors. I hereby accep	Litho appo	intmen	t as registered
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PVS VERDEGUER, JANET	☐ DELETE	1.1 HTLE			i	Char	nge 🔲 Addition
NAME Street Address	180 NE 39TH ST., STE. 221		1.2 NAME	ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY - 5					i
TITLE		DELETE	2.1 TITLE				Char	nge Addition
NAME			2.2 NAME					1
STREET ADDRESS			2.3 STREET	ADDRESS	·			
CITY-ST-ZIP		- Louis	2 4 CHY-	S1 - 71P				
TITLE	•	☐ DELETE	3 1 THILE				Char	nge 🔲 Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET	ADDRESS				ļ
CITY-ST-ZIP			3.4. C(TY-					}
TITLE		DELETE	4.1 TITLE	y. ="			Char	nge Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				}
CITY-ST-ZIP			4.4 CITY - S	31 - ZIP			_	
TITLE		☐ DELETE	5.1 TITLE	ļ			Char	nge Addition
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREET					
CITY-ST-ZIP TITLE		DELETE	5 4 CITY-S 6 1 TITLE	SI - ZIP			Char	nge Addition
NAME		C britic	6.2 NAME			•	01181	-8p [] Voginori
STREET ADDRESS			6.3 STREET	ADORESS				1
CITY-ST-ZIP			6.4 CITY - S	ļ				

14. I do hereby certify that the information supplied with this filing does not qualify for the examption 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 Block 12 or Block 13 if changed, or on an attachment with an address.

1/10/60

200/076-1627