

**2000 UNIFORM BUSINESS REPORT (UBR)****FILED****May 01, 2000 08:00 AM**  
**Secretary of State****DOCUMENT # L55903****1. Entity Name**  
DECOR BY SEA & SHORE, INC.**Principal Place of Business**7400 W. MCNAB RD.  
BAY 271  
N. LAUDERDALE  
33068

FL

US

**Mailing Address**7526 S.W. 6TH CT.  
N. LAUDERDALE  
33068

FL

US

**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

**4. FEI Number****65-0185569**

Applied For

Not Applicable

**5. Certificate of Status Desired**☐**\$8.75** Additional  
Fee Required**6. Name and Address of Current Registered Agent**BONGO JOSEPH  
7526 S.W. 6TH CT.N. LAUDERDALE  
33068

FL

US

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**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.****SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**05/01/2000**

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.**  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State****10. Election Campaign Financing  
Trust Fund Contribution.** ☐**\$5.00** May Be  
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	BONGO, GINA	
STREET ADDRESS	7526 S.W. 6TH CT. AVENUE	
CITY-ST-ZIP	N. LAUDERDALE FL 33068	

TITLE	D	<input type="checkbox"/> Delete
NAME	BONGO, JOSEPH	
STREET ADDRESS	7526 S.W. 6TH CT.	
CITY-ST-ZIP	N. LAUDERDALE FL 33068	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE: JOSEPH BONGO****PPES 05/01/2000**