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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 14 1998 8:00am Secretary of State

1998 DOCUMENT # (8) L86983 J.J. DECO, INC. Mailing Address Principal Place of Business 5321 KING ARTHUR AVENUE 5321 KING ARTHUR AVENUE DAVIE FL DAVIE FI DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/13/1990 2, Principal Place of Business 2a. Maning Address 4. FEI Number Applied For 21 65-0206447 Not Applicable Suite, Apt. #, etc. Surte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible X Yes 25 Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRAVERMAN, ARTHUR 7280 W. PALMETTO PARK RD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 202** 83 **BOCA RATON FL 33433** City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.5 TITLE STOLLER, JEFFREY I. NAME 1.2 NAME **5321 KING ARTHUR AVENUE** STREET ADDRESS 1.3 STREET ADDRESS DAVIE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TILE STOLLER, CAROL SUE 2 2 NAME 5321 KING ARTHUR AVENUE STREET ADDRESS 2.3 STREET ADDRESS DAVIE FL CITY-ST-ZIP 2 4 C/TY - ST - 7/P . DELETE ☐ Change Addition 3.1 TITLE STOLLER, CAROL SUE NAME 3.2 NAME 5321 KING ARTHUR AVENUE STREET ADDRESS 3.3 STREFT ADDRESS DAVIE FL CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Addition TITLE 4.1 TOLE NAME 4. 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-\$T-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP DELETE Change ☐ Addition TITLE 61 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information subject with this fring 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 purphymental 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 of 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 of an attachment with an address. (-305)

Flo

936-8278