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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M54751

SOUTH DECOR CORP.

(6)

FILED Mar 26 1997 8:00am Secretary of State



2060 SW 71S	ce of Business	Mailing Addres	SS			I NORMADII FOL DIVIL ONDIN IDDON ONDI FARA	FIBST Brait Atail Blace I	51911 8 1811 1891
	ST TERR		2080 S.W. 71ST TERR E-7 DAVIE FL 33317-7311 US					
E-7 Davie fl 333	317	DAVIE FL 33317						
U\$		US				3. Date Incorporated or Qualified 3a. Date of t 06/30/1987 04/10/18		
2. Principa I 1	Place of Business	2a. Mailing Add	tiress			4. FEI Number 59-2818996		Applied For Not Applicab
Suite Apt # etc		Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 '	5 Additional Required
City & State			City & State			6. Election Campaign Financing		\$5.00 May Be
3	Country	28 Zip		Country		Trust Fund Contribution	☐ Add	led to Fees
Zip 4	25	29	30	Country		This corporation has liability for in Florida Statutes	ntangible tax und Yes 🔲 No	er s. 199.032,
	9. Name and Address of Cu					10. Name and Address of New Reg	lstered Agent	
	ENGO, PASCUAL E.			81	Name			
917 SW 130 TERR FT LAUDERDALE FL 33325				82 Street Ac		ress (P.O. Box Number is Not Acceptable	le)	
• • • • • • • • • • • • • • • • • • • •	ENOUGHDALL I E SOOEO			83				
				84	City		85	Zip Code
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office or	registered agent or both, in the S	State of Florida. Such cha	ange was autho	rized by	the corpora	poration submits this statement for the pution's board of directors. I hereby accept	t the appointmen	t as registered
	1 1/2 11/1	ibligations of, Section 60.	7.USUS, FIORIDA	Statutes ••••••••••••••••••••••••••••••••••••	λ <u>,</u> Ξ	ienan IIT	2-21-	an a
SIGNATURE	Signer topki or printed mane gregislare	ad agent tino titio if ship cable	(NOTE: Reg	istered Age	int signature requi	ired when reastaling)	DATE	<u> </u>
2.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
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1 6 11	FIENGO, PASCUAL E.			1.2 NAME	- 1			
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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 efficer 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 op an attachment with an address.

SIGNATURE: