2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000015465

Entity Name: DECO TITLE SERVICES, INC

FILED Jan 12, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
15271 NW 60TH AVE SUITE 201 MIAMI LAKES, FL 33014			SUITE 195	15150 N.W. 79 COURT SUITE 195 MIAMI LAKES, FL 33016	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	TERRACE FL 33012				
FEI Number	: 65-0993046	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	LUIS TERRACE FL 33012	US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (FLORES, MAF 610 W 53 TEF HIALEAH, FL	RRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (FLORES, LUIS 610 W 53 TEF HIALEAH, FL	RRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS FLORES STD 01/12/2005