## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 14, 2005 08:00 AM Secretary of State DOCUMENT # P00000017912 1. Entity Name DECO GARAGE DOORS, INC. Principal Place of Business Mailing Address 4201 WESTGATE AVE #A-12 4201 WESTGATE AVE #A-12 WEST PALM BEACH, FL 33409 WEST PALM BEACH, FL 33409 The state of the s 01172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0982866 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DE LA PENA, ORLANDO DO NOT WRITE 4201 WESTGATE AVE #A-12 WEST PALM BEACH, FL 33409 IN THIS SPACE 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. It am familiar with, and accept the obligations of registered agent. (NOTE Registered Agent alignature required when reinstating) \$5.00 May Be 9. Election Campaign Financing U00000304691 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/14/05-80048-025 150.00 10. OFFICERS AND DIRECTORS TITLE DE LA PENA, ORLANDO NAME 4201 WESTGATE #A12 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33409 TITLE DE LA PENA, HANNAH NAME STREET ADDRESS 4201 WESTGATE AVE., #A-12 CITY-ST-ZIP WEST PALM BEACH, FL 33409 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NALE. STREET ADDRESS CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ITED NAME OF SIGNING OFFICER OR DIRECTOR

FILED