

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002919

Entity Name: LABARGE FAUX DECOR, INC.

FILED
Mar 18, 2004
Secretary of State

Current Principal Place of Business:

13882 OSPREY LINKS RD
APT 75
ORLANDO, FL 32837

New Principal Place of Business:

Current Mailing Address:

13882 OSPREY LINKS RD
APT 75
ORLANDO, FL 32837

New Mailing Address:

FEI Number: 59-3695262

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABARGE, DENNIS
14149 ISAMORADA DR.
ORLANDO, FL 32837

Name and Address of New Registered Agent:

LABARGE, DENNIS
13882 OSPREY LINKS RD.
APT 75
ORLANDO, FL 32837

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:

03/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LABARGE, MARIA
Address: 13882 OSPREY LINKS RD SPT 75
City-St-Zip: ORLANDO, FL 32837

Title: DS () Delete
Name: DENNIS, LABARGE
Address: 13882 OSPREY LINKS RD APT 75
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DENNIS LABARGE

DS

03/18/2004

Electronic Signature of Signing Officer or Director

Date