

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000024152 1. Entity Name 1438 DECOPLAGE, INC.			
Principal Place of Business 7 HERONS PLACE ISLEWORTH MIDDLESEX ENGLAND, tw-77be		Mailing Address C/O SIMON & SIMON PA 9100 SO. DADELAND BLVD., STE. 504 MIAMI, FL 33156	
2. Principal Place of Business - No P.O. Box # 61 COLE PARK ROAD		3. Mailing Address C/O JOY SPILL, SIMON & SIMON	
Suite, Apt. #, etc. TWICKENHAM, MIDDX		Suite, Apt. #, etc. 9500 SO. DADELAND BLVD	
City & State TWICKENHAM, MIDDX		City & State SUITE 708 MIAMI FL	
Zip TW1 1HT		Zip 33156	
Country UK		Country USA	
4. FEI Number 65-1084709		07142008 Chg-P CR2E034 (12/06)	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent SPILL, JOY B 9100 S DADELAND BLVD STE 504 MIAMI, FL 33156-7815 SIMON + SIMON, 9500 SO. DADELAND BLVD, SUITE 708 MIAMI, FL		7. Name and Address of New Registered Agent Name AS MAILING ADDRESS Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME GLASSBOROW, ANTHONY M STREET ADDRESS 7 HERONS PLACE LION WHARF ROAD CITY-ST-ZIP OLD ISLEWORTH MIDDLESEX, UK TW77BE	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		5 AUGUST 2008 <small>Date Daytime Phone #</small>	

A-GLASSBOROW

ATTACHMENT

40113846

1438 Decoplage Inc

#P01000024152

61 Cole Park Road, Twickenham, Middlesex TW1 1HT, UK

5 August 2008

Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee
Florida 32301
USA

Dear Sir Madam

1438 Decoplage Inc

Please find attached cheque no 0345 for \$550 as requested for the late filing of my Corporation above.

I apologise for the late payment and would be grateful if consideration could be given to the change of mailing address to 9500 South Dadeland Boulevard, Suite 708 Miami, Florida 33156 and my business address from 7 Herons place, Isleworth Middx, TW1 1HT UK to the above in Twickenham.

Is it possible for the late payment fee be waived in this situation? I have always paid on time in all previous years.

Yours sincerely



A M Glassborow
President, 1438 Decoplage Inc