P01000037864

1. Entity Name

DOCUMENT #

ART DECO CONSTRUCTION CORP.

FILED Apr 01, 2002 8:00 am Secretary of State 04-01-2002 90625 042 ***150.00

Principal Plac	ce of Business	Mailing Address								
2418 SW 16 A	NVE	2418 SW 16 AVE								
MIAMI FL 3314	45	MIAMI FL 33145		-						
					1116)	PHA (18) (19)
	7.0	I a								
2. Principal F	Place of Business NE 3 AVE	3. Mailing Address	3 AUE	-	* ****					
Suite, Apt.		Suite, Apt. #, etc.	$\overline{}$, i	DO NO	T WRITE I	N THIS S	PACE	
City & Stat	IMI FLORIDA	City & State, FI	0210A		4. FEI Nun		509		No	oplied For ot Applicable
33/3	38 DADE	33138	Country	5	5. Certifica	ate of Status De	sired		8.75 Add	ditional ed
	6. Name and Address of Current R	legistered Agent		7	7. Name a	nd Address of	New Reg	stered A	gent	
			Name (DE 1	EON	EQU	AQD	ก		
de Leon,	Street Ad	Ctroot Address (D.O. Doy Number is Net Assembly)								
2418 SW	16 AVE	٠.٠	21	85 h) -	(23.5)	<u> </u>	#	206	>
MIAMI FL	33145									
			City ស	-27-	i L	i Ami		FL	Zip Cod	e 0:
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B. The above	named entity submits this statement for	the purpose of changing its r	egistered office or	registered	agent, or i	both, in the Stat	te of Florid	a.		
	<u> </u>			٠						
SIGNATURE .	Signature, typed or printed name of registered agent an	nd title if applicable. (NOTE:	Registered Agent signatu	re required whe	en reinstating)			DATÉ		
A This serve		EU E NOW	. FFE IC 6450.0	٠,						
9. THIS COIDS	oration is eligible to satisfy its Intangible	FILE NOW!	! FEE IS \$150.0	iu	1 40	Clastian Camer	sian Einan	sina	¢c n	0 May Be
•	requirement and elects to do so.	After May 1, 200	2 Fee will be \$5	50.00		Election Campa			, 35.U	May Be
Tax filing	requirement and elects to do so.	After May 1, 200 Make Check Payabl				Trust Fund Con		, iig - ' 🖂	Added	to Fees
Tax filing		Make Check Payabl		of State	-		tribution.		Added	to Fees
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naceby cerally may may me 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 trigistical emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an additions, with all other like empowered.

SIGNATURE: