

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90351 004 ***150.00

DOCUMENT # P010000 49310-

1. Entity Name

Custom wood Decorations Corp

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1855 SW 4th Avenue

3. Mailing Address

Suite, Apt. #, etc. B-27

Suite, Apt. #, etc.

City & State

Delray Beach

City & State

Zip

33444

Country

Zip

Country

4. FEI Number

65-1104630

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Eddy A Villatoro

Street Address (P.O. Box Number is Not Acceptable)

1855 SW 4th Ave # B-27

City Delray Beach

FL

Zip Code 33444

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.

SIGNATURE

Eddy A Villatoro
Signature, typed or printed name of registered agent, and title if applicable.

Eddy A Villatoro

(NOTE: Registered Agent signature required when reinstating)

4/29/02

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME Eddy A Villatoro
STREET ADDRESS 1855 SW 4th Ave # B-27
CITY-ST-ZIP Delray Beach FL 33444

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**DO NOT WRITE
IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Eddy A Villatoro*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eddy A Villatoro
president

(561) 265-10-67

4/29/02

Date

Daytime Phone #