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

DOCUMENT # P02000074/82

WALL DECOR, INC. NATURE'S



Apr 16, 2003 8:00 am Secretary of State 04-16-2003 90168 012 ***150.00

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				्राप्ता । -		
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
# 200		# 200				
City & State DEERFIEL		City & State DEERFIELD BE	ACH, FLORIDA	4. FEI Number 65 - 113 65 40	Applied For Not Applicable	
Zip 33442	Country V.S.A.	Zip 33442	Country U. 5.A.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
			Name	7. Name and Address of Current Registered Agent Name		
ALANY STORY STORY	DO NOT WI	DITE	FIC.	HARD A. COLUMBO		
			Street Address	B. NESTING WAY		
	IN THIS SPA	ACE			· · · · · · · · · · · · · · · · · · ·	
			City		Zip Code	
			DELIZAS		33484	
	amed entity submits this statement for ns of registered agent.	the purpose of changing its	s registered office or regist	ered agent, or both, in the State of Florida. I am f	amiliar with, and accept	
	ă.					
SIGNATURE _	ു. ignature, typed or printed name of registered agent ar	od title if applicable (MCI)	E: Registered Agent signature requir	ed when reinstating) DATE		
and the state of t	ary 1 - May 1 Fee is \$150.00	id the rappicable. (NOT	C. negistered Agent signature requir	ou when remisiding) DATE		
	fter May 1, Fee is \$550.00 Amended UBR is \$61.25 'ayable to Florida Department of i			9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND D	Contract the Contract of		The control of the co		
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NAME STREET ADDRESS			NAME	n - The state of t	m amaga la jan ta j	
CITY-ST-ZIP			STREET ADDRESS	A CONTRACTOR OF THE PROPERTY O		
12. I hereby cer	tify that the information supplied with t	his filing does not qualify fo	r the exemption stated in S	ection 119.07(3)(i), Florida Statutes. I further cer	ify 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 on an attachment with an address, with all other-like empowered.

SIGNATURE:

RICHARD A. COLUMBO