

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000076458

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** DECORATORS RESOURCE ESTATE FURNISHINGS, INC.

**Current Principal Place of Business:**

333 US HWY ONE  
WEST PALM BEACH, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

8327 MAN O WAR ROAD  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** 65-1128793

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BURNSIDE, BRIAN  
8327 MAN O WAR ROAD  
PALM BEACH GARDENS, FL 33418 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BURNSIDE, CAROLINE  
Address: 8327 MAN O WAR ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VSTD  
Name: BURNSIDE, BRIAN  
Address: 8327 MAN O WAR ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby 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 all other like empowered.

SIGNATURE: CAROLINE BURNSIDE

PRES

03/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date