

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91765 019 ***150.00

2003 UNIFORM BUSIN. S REPORT (UBR)

DOCUMENT # **P02000066959**
1. Entity Name
DECOR IMPORTS, INC
Principal Place of Business
8671 NW 56 ST
MIAMI, FL 33166
Mailing Address
8671 NW 56 ST
MIAMI, FL 33166

90128481

2. Principal Place of Business
5701 SUNSET DR.
Suite, Apt. #, etc.
STE 156
City & State
MIAMI FL
Zip
33143 Country
DADE
3. Mailing Address
5701 SUNSET DR.
Suite, Apt. #, etc.
STE 156
City & State
MIAMI, FL
Zip
33143 Country
DADE

DO NOT WRITE IN THIS SPACE

4. FEL Number
82-0549774 Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Name and Address of Current Registered Agent
ZAMUDIO, VANESSA
8671 NW 56 ST
MIAMI, FL 33166
7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
5701 SUNSET DR.
STE 156
City **MIAMI** FL Zip Code **33143**

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 **Vanessa Zamudio**
Signature typed or printed name of registered agent not applicable. (NOTE: Registered Agent signature required when reappointing) DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐
10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME ZAMUDIO, VANESSA STREET ADDRESS 8671 NW 56 ST CITY- ST- ZIP MIAMI, FL 33166	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: **Vanessa Zamudio**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR