2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 07, 2005 08:00 AM Secretary of State

1. Entity Nam SUPERIO	MENT # P02000067941 DR YARD DECOR, INC. The of Business — Mailing Address		Secretary of State
1057 N. HW LONGWOOD,	Y 17-92 2323 S VOLUS FL 32750 - ORANGE CITY, I		
DO NOT WRITE IN THIS SPACE			01242005 No Chg-P CR2E034 (10/03) 4. FEI Number 03-0465632 Applied For Not Applicable 5. Certificate of Status Desired □ \$8.75 Additional Fee Required
MARTENS, ALEX G			DO NOT WRITE
IN ITIS SPACE			
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typed or primed name of registered agent and title if applicative. (NOTE Registered Agent schalure agent agent and title if applicative.) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECTORS		02/07/05-80065-017 150.00
NAME STREET ADDRESS CITY-SI-ZIP	MARTENS, ALEX 17995 1ST AVE S SAINT PETERSBURG, FL 33707		ns: 01/ 03_00002-011 130* no
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SEXTON, DAVID N 4001 TAMIAMI TRAIL N#404 NAPLES, FL 34103	45-	
TITLE NAME STREET ADDRESS CITY+ST-ZIP			DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			·
12. 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered			
SIGNATURE: MANTENS PRET 21105 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DELLA DAYKING PRODE K			