## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 01, 2004 8:00 am Secretary of State

DOCUMENT # P02000131684  1. Entity Name DECO DENIM ON-LINE COMPANY					04-01-2004 90025 041 ***150.00				
Oringinal Plac	o of Duringer	Mailing Address	<del></del>		┪		ハエハエヤ	V. J. V	
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17700 COLLINS AVE SUNNY ISLES BEACH, FL 33160  17700 COLLINS AVE SUNNY ISLES BEACH, FL 33160  SUNNY ISLES BEACH, FL				50					
00(1)	, D.D. 1611, 1.2. 33100		,,,,,	•	4 (60)(60) 111				26t W 1221
					_				
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address			FOIR (1811 DOI) DE III GOI			
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			03232004 Chg-P CR2E034 (10/03)				
' '						Chg-P	CR2E034	1 (10/03)	
City & State		City & State			4. FEI Numbe			_ <del> </del>	plied For
		ļ			38-3669	0052			Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of	of Status Desired		<b>8.75</b> Add ee Required	
<del></del>	6. Name and Address of Currer	nt Registered Agent		<del></del>	7. Name and	Address of New F		<u></u>	-
		Name	7. Name and Address of New Registered Agent Name						
TARR, ANDREW D				Street Address (P.O. Box Number is Not Acceptable)					
1250 E HALLANDALE BEACH BLVD STE 710				Street Address	(F.O. BOX Numbe	. Is INOLACCEDIADIO	=)		
HALLANDALE BEACH, FL 33009									
				City				Zip Code	
							FL		
	named entity submits this statement tions of registered agent.	for the purpose of changing	its register	red office or registe	ered agent, or both	n, in the State of Flo	orida. I am fa	miliar with,	and accept
i me obrigat	nons of registered agent.								
SIGNATURE.	Signature, typed or printed name of registered age	us and title if configurable (A	NOTE: Penetar	ed Agent signature require	and unknown constraints	~~~	DATE		
	Signature, types or printed fighter or registered tige	ant arite may appricable. (1	VOTE: Negisteri	eo Agent signature require	o witeri reins(aung)		UATE		
FIL	E NOW!!! FEE IS \$150.00	9. Election Cam			5.00 May Be				
After M	ay 1, 2004 Fee will be \$550	D.00 Trust Fund C	ontribution.	. L Ad	ded to Fees				
10.	OFFICERS AN	D DIRECTORS	11.	<del></del>	ADDITIONS/	CHANGES TO OFF	ICERS AND D	DIRECTORS	IN 11
TITLE	D	☐ Delete	ŢĬŢĬ	LE				Change	☐ Addition
NAME	POZNANSKI, ISAAC		NAM	viE .					
STREET ADDRESS	17700 COLLINS AVE			REET AODRESS					
CITY-ST-ZIP	SUNNY ISLES BEACH, FL 33		CiT	Y-ST-ZIP					
TITLE	D D	☐ Delete	TITE	ì.				Change	☐ Addition
NAME STREET ADDRESS	SHELOMOVITZ, BARRY		NA)	ME REET ADDRESS					
CITY-ST-ZIP	SUNNY ISLES BEACH, FL 33	160		Y-ST-ZIP					
TITLE	SOMET IGEE BEAGIT, I'E 33	Delete	IIII					Change	Addition
NAME		LJ Pelete	NA!					onange	AGUIRUII
STREET ADDRESS			SIF	REET ADDRESS					
CITY-ST-ZIP				Y+ST-ZIP					
TIŢĻE		Delete	TIT	LE				☐ Change	☐ Addition
NAME			NAI	ME					
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP			CIT	Y-ST-ZIP					
TITLE		Defete	TIT					Change	Addition Addition
NAME			NAI						
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP				Y+ST-ZIP					
THE		☐ Delete	1111	<b>I</b>				Change	☐ Addition
NAME STREET ADDRESS			nai Ste	ME REET ADDRESS					
CITY-ST-7IP				Y-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 trustee 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: X Bose Pos ....

X 3/29/04

305-732-338 Daytiline Prione #