2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007
Secretary of State

DOCUMENT# P04000008261

Entity Name: DECORACIONES INTERGRALES II INC.

Current Principal Place of Business:

2170 NE 162ND ST.
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

2060 NE 155 STREET
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

2170 NE 162ND ST.
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

2060 NE 155 STREET
NORTH MIAMI BEACH, FL 33162

FEI Number: 58-2682780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMITRANO, EDUARDO
2170 NE 162ND ST.
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

AMITRANO, EDUARDO
2060 NE 155 STREET
NORTH MIAMI BEACH, FL 33162 US

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: 04/12/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: AMITRANO, EDUARDO
Address: 2170 NE 162ND ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD ( ) Delete
Name: BELLIFEMINE, RITA
Address: 2170 NE 162ND ST.
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: AMITRANO, EDUARDO
Address: 2060 NE 155 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD (X) Change ( ) Addition
Name: BELLIFEMINE, RITA
Address: 2060 NE 155 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDUARDO AMITRANO PD 04/12/2007
Electronic Signature of Signing Officer or Director — Date