2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000013346

FILED Apr 29, 2005 Secretary of State

Entity Name: DECO INTERNATIONAL LUGGAGE SHIPPING SERVICES, INC.

Name and Address of Current Registered Agent: DRDAZ, MARIA E 11330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: ORDAZ, MARIA E Name: Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Title: () Change () Addition Name: Name: AGUILA, SONIA M				
HALEAH, FL 33012 STE 225 MIAMI LAKES, FL 33014 New Mailing Address: 11330 NW 58 PLACE HALEAH, FL 33012 FEI Number: 20-0818030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DRDAZ, MARIA E H1330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Electronic Signature of Registered Agent Date Title: PTD () Delete Name: ORDAZ, MARIA E Name: Address: 11330 NW 58 PLACE City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012 Title: () Change () Addition Name: AGUILA, SONIA M Name:	Current Principal Place of Business:		New Principal Place of Business:	
A STE 225 HIALEAH, FL 33012 FEI Number: 20-0818030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DRDAZ, MARIA E 11330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Electronic Signature of Registered Agent Date FITTIE: OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Name: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Name: AGUILA, SONIA M			STE 225	14
STE 225 MIAMI LAKES, FL 33014 FEI Number: 20-0818030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: DRDAZ, MARIA E 11330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. BIGNATURE: Electronic Signature of Registered Agent Date Electron Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Title: () Change () Addition Name: Name: AGUILA, SONIA M Name:	Current Mailing Address:		New Mailing Address:	
Name and Address of Current Registered Agent: DRDAZ, MARIA E 11330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: ORDAZ, MARIA E Address: 11330 NW 58 PLACE Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Title: () Change () Addition Name: Name: AGUILA, SONIA M			STE 225	14
DRDAZ, MARIA E 11330 NW 58 PLACE HIALEAH, FL 33012 US The above named entity submits this statement for the purpose of changing its registered office or registered agent not the State of Florida. BIGNATURE: Electronic Signature of Registered Agent Date	FEI Number: 20-0818030 FEI Number	Applied For () FEI No	umber Not Applicable ()	Certificate of Status Desired ()
And the state of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PTD () Delete Name: ORDAZ, MARIA E Address: 11330 NW 58 PLACE Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Fitle: V () Delete Title: () Change () Addition Name: Address: City-St-Zip: Fitle: V () Delete Title: () Change () Addition Name: Name: AGUILA, SONIA M Name:	Name and Address of Current Regis	tered Agent:	Name and Address of New Registered Agent:	
n the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Date Clection Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: Address: 11330 NW 58 PLACE Address: City-St-Zip: HIALEAH, FL 33012 Title: V () Delete Title: () Change () Addition Name: AGUILA, SONIA M Name:	11330 ŃW 58 PLACE			
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: ORDAZ, MARIA E Name: Address: 11330 NW 58 PLACE Address: Dity-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: V () Delete Title: () Change () Addition Name: AGUILA, SONIA M Name:		tatement for the purpose	of changing its registered	office or registered agent, or both,
Election Campaign Financing Trust Fund Contribution (). DFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: PTD () Delete Title: () Change () Addition Name: ORDAZ, MARIA E Address: 11330 NW 58 PLACE Address: City-St-Zip: HIALEAH, FL 33012 City-St-Zip: Title: V () Delete Title: () Change () Addition Name: AGUILA, SONIA M Name:	SIGNATURE:			
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Name: AGUILA, SONIA M Name:	Name: ORDAZ, MARIÁ E Address: 11330 NW 58 PLACE		Name: Address:	()Change ()Addition
Address: 494 THACKERAY AVE. Address: City-St-Zip: WORTHINGTON, OH 43085 City-St-Zip:	Name: AGUILA, SONIA M Address: 494 THACKERAY AVE.		Name: Address:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIA E ORDAZ PVD 04/29/2005