

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # P05000158960

1. Entity Name
JAZA INTERIOR DECORATING INC.



Principal Place of Business
**27027 SEA BREEZE WAY
WESLEY CHAPEL, FL 33543**

Mailing Address
**27027 SEA BREEZE WAY
WESLEY CHAPEL, FL 33543**



05032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 13-4316794	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ZAMOR, NATACHA
27027 SEA BREEZE WAY
WESLEY CHAPEL, FL 33543**

**DO NOT WRITE
IN THIS 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 printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	ZAMOR, NATACHA
STREET ADDRESS	27027 SEA BREEZE WAY
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543

TITLE	P
NAME	JADOTTE, ROMUALD
STREET ADDRESS	27027 SEA BREEZE WAY
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543

TITLE	SEC
NAME	JADOTTE, ROMUALD
STREET ADDRESS	27027 SEA BREEZE WAY
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543

TITLE	CFO
NAME	ZAMOR, NATACHA
STREET ADDRESS	27027 SEA BREEZE WAY
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/25/07-80047-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Natacha Zamor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/02/07
Date

240-11618
Daytime Phone