

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000096152

FILED  
Jan 15, 2007  
Secretary of State

Entity Name: DECOPLAST OF FLORIDA, INC.

**Current Principal Place of Business:**

821 US HWY 1  
LAKE PARK, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

821 US HWY 1  
LAKE PARK, FL 33403

**New Mailing Address:**

FEI Number: 20-5248547      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WASSERMAN, NINA  
24000 PORTOFINO CIRCLE  
107  
PALM BEACH GARDENS, FL 33403 US

**Name and Address of New Registered Agent:**

WASSERMAN, NINA  
821 US HWY 1  
LAKE PARK, FL 33403 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: NINA WASSERMAN      01/15/2007  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WASSERMAN, NINA  
Address: 24000 PORTOFINO CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VP ( ) Delete  
Name: CAVALIERI, ANTHONY  
Address: 2436 SAN PIETRO CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WASSERMAN, NINA  
Address: 120 DUNMORE DRIVE  
City-St-Zip: JUPITER, FL 33458 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NINA WASSERMAN      P      01/15/2007  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date