

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**Feb 05 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P07413 (8)**

1. Corporation Name  
**DECO MANAGERS, INC.**



Principal Place of Business <b>%MARTIN S. MAJOR 152 W 57TH ST NEW YORK NY 10019</b>	Mailing Address <b>%MARTIN S. MAJOR 152 W 57TH ST NEW YORK NY 10019</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 % Urban Group Suite, Apt. #, etc. 22 152 W. 57th St. City &amp; State 23 New York, NY Zip 24 10019</b>	2a. Mailing Address <b>26 % Urban Group Suite, Apt. #, etc. 27 152 W. 57th St. City &amp; State 28 New York, NY Zip 29 10019</b>	3. Date Incorporated or Qualified <b>09/13/1985</b>	4. FEI Number <b>13-3240037</b>
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Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**GROSS, SAUL  
% STREALMINE PROPERTIES  
1125 WASHINGTON AVENUE  
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	VSD	<input type="checkbox"/> DELETE
NAME	MALMAN, ARTHUR	
STREET ADDRESS	152 W. 57 STREET	
CITY - ST - ZIP	NEW YORK NY	
TITLE	VAS	<input type="checkbox"/> DELETE
NAME	GROSS, SAUL	
STREET ADDRESS	1125 WASHINGTON AVE.	
CITY - ST - ZIP	MIAMI BEACH FL	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	MAJOR, MARTIN	
STREET ADDRESS	152 W 57TH ST	
CITY - ST - ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VDT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Martin Major	
1.3 STREET ADDRESS	25 Chestnut Hill Lane	
1.4 CITY - ST - ZIP	Briarcliff Manor, NY 10510	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] **URE REQUIRED** 1/25/98 212-586-3800

CR2E034 (10/97)