

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90087 015 ***150.00

DOCUMENT # P93000052675

1. Entity Name
DECI INVESTMENTS, INC.



Principal Place of Business
2000 EAST 4TH AVENUE
HIALEAH, FL 33010 US

Mailing Address
2000 EAST 4TH AVENUE
HIALEAH, FL 33010 US

94053300



2. Principal Place of Business

2020 North Flamingo Road

Suite, Apt. #, etc.

3. Mailing Address

2020 North Flamingo Road

Suite, Apt. #, etc.

03092004

Chg-P

CR2E034 (10/03)

City & State

Pembroke Pines, Florida

City & State

Pembroke Pines, Florida

4. FEI Number

65-0427172

Applied For

Not Applicable

Zip
33028

Country
USA

Zip
33028

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ELIAS, JOHN ESQ
2000 EAST 4TH AVENUE
HIALEAH, FL 33010

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	ELIAS, JORGE	
STREET ADDRESS	2000 EAST 4TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SANTIAGO, ELIAS	
STREET ADDRESS	2000 EAST 4TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE	T	<input type="checkbox"/> Delete
NAME	TAMARGO, MARIA	
STREET ADDRESS	2000 EAST 4TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE	S	<input type="checkbox"/> Delete
NAME	SANTANA, MERCEDES	
STREET ADDRESS	2000 EAST 4TH AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33010	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Santiago Elias	
STREET ADDRESS	2020 North Flamingo Road	
CITY-ST-ZIP	Pembroke Pines, Florida 33028	
TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Milagros Perez	
STREET ADDRESS	2020 North Flamingo Road	
CITY-ST-ZIP	Pembroke Pines, Florida 33028	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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: X

SANTIAGO ELIAS, PRESIDENT

Date: X 4/10/04

Daytime Phone #