

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000065103 (2)**

1. Corporation Name

DECO NATURAL STONE NO.2, INC.



Principal Place of Business

**3204 N.W. 79TH AVE.
MIAMI FL 33122**

Mailing Address

**3204 N.W. 79TH AVE.
MIAMI FL 33122**

2. Principal Place of Business

2a. Mailing Address

21. Sub. Apt. #, etc.

26. Sub. Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Country

29. Country

9. Name and Address of Current Registered Agent

**OROZCO, OSVALDO R ESQ.
1378 CORAL WAY
4TH FLOOR
MIAMI FL 33145**

3. Date Incorporated or Qualified

09/14/1993

3a. Date of Last Report

03/24/1995

4. FEI Number

65-0438446

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1206, 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

12. OFFICERS AND DIRECTORS

1. NAME ☐ DELETE
P HAEDO, FRANCISCO
2. STREET ADDRESS **3204 NW 79 AVE**
3. CITY, STATE, ZIP **MIAMI FL**
4. NAME ☐ DELETE
5. STREET ADDRESS
6. CITY, STATE, ZIP
7. NAME ☐ DELETE
8. STREET ADDRESS
9. CITY, STATE, ZIP
10. NAME ☐ DELETE
11. STREET ADDRESS
12. CITY, STATE, ZIP
13. NAME ☐ DELETE
14. STREET ADDRESS
15. CITY, STATE, ZIP
16. NAME ☐ DELETE
17. STREET ADDRESS
18. CITY, STATE, ZIP
19. NAME ☐ DELETE
20. STREET ADDRESS
21. CITY, STATE, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME ☐ Change ☐ Addition
2. STREET ADDRESS
3. CITY, STATE, ZIP ☐ Change ☐ Addition
4. NAME ☐ Change ☐ Addition
5. STREET ADDRESS
6. CITY, STATE, ZIP ☐ Change ☐ Addition
7. NAME ☐ Change ☐ Addition
8. STREET ADDRESS
9. CITY, STATE, ZIP ☐ Change ☐ Addition
10. NAME ☐ Change ☐ Addition
11. STREET ADDRESS
12. CITY, STATE, ZIP ☐ Change ☐ Addition
13. NAME ☐ Change ☐ Addition
14. STREET ADDRESS
15. CITY, STATE, ZIP ☐ Change ☐ Addition
16. NAME ☐ Change ☐ Addition
17. STREET ADDRESS
18. CITY, STATE, ZIP ☐ Change ☐ Addition
19. NAME ☐ Change ☐ Addition
20. STREET ADDRESS
21. CITY, STATE, ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the registered agent 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 checked, or in Block 14 with an address.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Francisco Haedo)

1/30/96 (305) 471-0075

CR2E034 (12/95)