SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 8/0/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $275)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:47

DOCUMENT # P94000080215 (4)

1. Corporation Name
LANDMARK DECORATING, INC.

Principal Place of Business	Mailing Address
12395 PECONIC CT WEST PALM BEACH FL 33414	12395 PECONIC CT WEST PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/31/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 108 Cypress Lane	26 108 Cypress Lane
Suite, Apt. #, etc. 22 Royal Palm Beach Fl.	Suite, Apt. #, etc. 27 Royal Palm Bch Fl.
City & State 23 33411	City & State 28 33411
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 65-0529040 — Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐ — $0.75 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

9. Name and Address of Current Registered Agent

BURNS, ROBERT
12395 PECONIC CT
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81 Name: Burns, Robert
82 Street Address (P.O. Box Number is Not Acceptable): 108 Cypress Lane
83
84 City: Royal Palm Bch. FL 85 Zip Code: 33411

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: Robert Burns — 6/26/95
(Signature of new registered agent, if changing) NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS		
TITLE	D	11 TITLE		☒ Change ☐ Addition
NAME	BURNS, ROBERT	12 NAME	Burns Robert	
STREET ADDRESS	12395 PECONIC CT	13 STREET ADDRESS	108 Cypress Lane	
CITY ST ZIP	WEST PALM BEACH FL 33414	14 CITY ST ZIP	Royal Palm Bch Fl 33411	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	ARENDT, EUGENE	22 NAME		
STREET ADDRESS	12395 PECONIC CT	23 STREET ADDRESS		
CITY ST ZIP	WEST PALM BEACH FL 33414	24 CITY ST ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY ST ZIP		34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

14. I do 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)(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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Robert Burns — Robert Burns — 6/26/95 — 407-790-6512
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Common CF