

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000007456

Entity Name: SABA DECORATING, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

106 SPRUCE STREET  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

Current Mailing Address:

106 SPRUCE STREET  
BOYNTON BEACH, FL 33426 US

## New Mailing Address:

FEI Number: 65-0553133      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ALL FLORIDA FIRM INC  
813 DELTONA BLVD STE A  
(BOX #133926)  
DELTONA, FL 32725 US

## Name and Address of New Registered Agent:

SABA, RICK J P  
106 SPRUCE ST  
BOYNTON BEACH, FL 33426 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: RICK J SABA SR

04/30/2009

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SABA, RICK J  
Address: 106 SPRUCE ST  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP (X) Delete  
Name: SABA, CAROL A  
Address: 106 SPRUCE ST  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: S ( ) Delete  
Name: GUTOWSKI, JAMES T  
Address: 203 E. LANTANA RD. 312  
City-St-Zip: LANTANA, FL 33462

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: RICK J SABA SR

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date