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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000015664 (2)

ASHLEY'S DECORATING GALLERY, INC.

Principal Place o	of Business	Mailing Address	Mailing Address			t debinest ten mint ditte detti netti netti desti desti ettin sitte atti detti didi.		
4660 S.W. 72 AVE. Miami Fl 33155		4660 S.W. 72 AVE. Miami FL 33155						
						3. Date Incorporated or Qualified 3a. Date of Last Report 02/24/1995		
Principal Place of Business 21		2a. Mailing Address 26	ker s			4. FEI Number Applied For Not Applied For Not Applied Por		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	∳······¬			5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State	http://www.ministration.com/			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip 24	Country 25	7(p 29]	Country 30	/ 		B. This corporation has liability for intangible tax under s 199.032, Florida Statutes		
	g. Name and Address of C	current Registered Agent	81	۱	Name	10. Name and Address of New Registered Agent		
AUDBEL () 100F I			'				
CURBELO, JOSE I 4660 S.W. 72 AVE. MIAMI FL 33155			82	1	Street Addre	ass (P.O. Box Number is Not Acceptable)		
			83					
			84	(City	FL 85 Zip Code		
or registere	d agent, or both lin the State o					ation submits this statement for the purpose of changing its registered offic d of directors. I hereby accept the appointment as registered agent. I am		
S	gnature typed or printed same of rigisline	and the second of the second o	TE Registered Ager	n: si	ignative recurred	, and a second framework and a second control of the second contro		
12.		RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 [1] Change [1] Addition		
NAME	d Curbbelo, Jose I	L,, DERCH	1,2 NAME			En violes En viole		
STREET ADDRESS	4660 S.W. 72 AVE.		1.3 STREET	L A£	DDRESS			
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY - S	ST-	ZIF			
TITLE		[] DELEJE	2.1 TITLE			Change Addition		
NAME			2.2 NAME					
STHEET ADDRESS			23 STREET	EET ADDRESS				
CITY-ST-ZIP		Fill Drufter	24 Dily-S1-7/P		7/P	FT Change FT Addition		
TITLE		[_] DELFTE				Change [1] Addition		
NAME STREET ADDRESS			3.2 NAME	ET ADDRESS				
CITY-ST-7IP			3 4 CITY - ST - 7IP					
TITLE		["] DELETE	4 3 TITLE		1	[_] Change [Addition		
NAME		-	4.2 NAME					
STREET ADDRESS			4.3 STREE	1 A:	ODRESS			
CiTY-ST-ZIP			4.4 CITY-3	ST-	ZIP			
INLE		DELFTE	5 110.8	5 1301.8		Change Addition		
NAME			5.2 NAMÉ					
STREET ADDRESS			5.3 STREE	I AE	DDRESS			
CITY-ST-ZIP			5.4 CITY - S		7IP			
TITLE	End Delene				Change Addition			
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE		1			
CHY-ST-ZIP		landa da distribuida de la composición	6.4 CHY-1		d	11 (C. 17 (17 (17 (17 (17 (17 (17 (17 (17 (17		
certify that oath; that I	the information indicated on the am an officer or director of the	's annual report or supplemental anni	ual report is tri empowered	ue	and accura-	or the exemption stated in Section 119.0/(3)(k), Florida Statutes, Hurther te and that my signature shall have the same legal effect as if made under s report as required by Chapter 607, Florida Statutes; and that my name		

SIGNATURE: DOOD PURKED JOER.

SIGNING OFFICER OR DIRECTOR CHAPLO

diplo

(395) 663-9947