

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000085172 1. Entity Name INTERNATIONAL VERTICLES & DECOR, INC.	
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Principal Place of Business 1311 BAY STREET KISSIMMEE, FL 34744-4205	Mailing Address 1311 BAY STREET KISSIMMEE, FL 34744-4205
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent GONZALEZ, RAMON 103 SOUTH THACKER AVENUE KISSIMMEE, FL 34741	DO NOT WRITE IN THIS SPACE
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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.

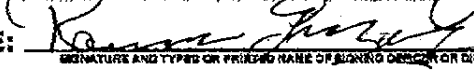
SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-issuing) DATE _____

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	U000000122550 04/21/04-80033-016 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PTD GONZALEZ, RAMON 103 SOUTH THACKER AVENUE KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD GONZALEZ, MIGUEL 103 SOUTH THACKER AVENUE KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD GONZALEZ, RAMON A 2764 WOOD STREAM CIRCLE KISSIMMEE, FL 34743
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(3), Florida Statutes. I further certify that the information indicated on this report of 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 507, 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **4/16/04 (407) 847-5592**
Date Filing Price