## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012993 (7)  DECO WORLD DESIGN, INC.										
P	Principal Place of Business Mailing Address						I TRONINGE THE TEXTS BUILT BOTT BOTT BOTT BOTT THE TOTAL TOTAL TOTAL TOTAL INTERSTITE			
8025 W 26TH CT HIALEAH FL 33016			8025 W 26TH CT HIALEAH FL 33016							
							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  02/12/1996			
2. 21	Principal Pla <b>ce</b> of Busin	Principal Place of Business 2a. Mailing Address 26					4. FEI Number 65-0657964	Applied For Not Applicable		
22	Suite, Apt. #, etc.	Suite, Apl. #, etc.	Suite, Apl. #, etc.				\$8.75 Additional Fee Required			
23	City & State City & State						6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
24	Zip	Country 25	Ζ(p	Cou 30	Country		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	nt year Intangible Yes		
	9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
COHEN, MARK D EMERALD HILLS EXECUTIVE PLAZA II 4651 SHERIDAN ST, SUITE 300 HOLLYWOOD FL 33021					81	Name				
					82	Street Address (P.O. Box Number is Not Acceptable)				
					83					
					84	City	FL_	85 Zip Code		
1	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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE										
12	12. OFFICERS AND DIRECTORS 13.						ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12		
Jil	·······			1.1 T)1	LE		Change Addition			
No	VAME CORBO, ELENO			12 NA	12 NAME			i		

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		Hogistered Agent signature	· · · · · · · · · · · · · · · · · · ·								
12.	OFFICERS AND DIRECTORS  DELETE	<del> </del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition								
TITLE		1.1 TITLE	C. Crange C. Abujilori								
NAME	CORBO, ELENO	1.2 NAME									
STREET ADDRESS	8025 W 26TH CT	1.3 STREET ADDRESS									
CITY-ST-ZIP	HIALEAH FL 33016	1.4 CITY-ST-ZIP									
TITLE	DELETE	2 1 TITLE	☐ Change ☐ Addition								
NAME		2.2 NAME									
STREET ADDRESS		2.3 STREET ADDRESS									
CITY-ST-ZIP	<u> </u>	2. 4 CITY - ST - ZIP									
TITLE	DELETE	3 1 TITLE	Change Addition								
NAME		3.2 NAME									
STREET ADDRESS		3.3 STREET ADDRESS									
CITY-ST-ZIP		3.4. CITY-ST-ZIP									
TITLE	DELETE	4.1 TITLE	Change Addition								
NAME (		4. 2 NAME									
STREET ADDRESS		4.3 STREET ADDRESS									
CITY-ST-ZIP		4.4 CITY-ST-ZIP									
TITLE	DELETE	5 1 TITLE	Change Addition								
NAME		5.2 NAME									
STREET ADDRESS		5.3 STREET ADDRESS									
CITY-ST-ZIP		5.4 CITY-ST-ZIP									
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition								
NAME		6.2 NAME									
STREET ADDRESS		6.3 STREET ADDRESS									
CITY-ST-ZIP		6.4 CITY - ST - ZIP									

14. Thereby certify that the information supplied with this filing 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 aprillad poort is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trisled empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attrictment with an address.

**FILED** 

Jul 08 1998 8:00am

Secretary of State