

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P96000020510*

1. Entity Name

DECORUM, INC

**FILED  
Apr 23, 2002 8:00 am  
Secretary of State**

04-23-2002 90426 041 \*\*\*150.00

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**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

5132 WILLOW LEAF DR.

Suite, Apt. #, etc.

3. Mailing Address

4411 BEE RIDGE RD

Suite, Apt. #, etc.

SUITE 131

**DO NOT WRITE IN THIS SPACE**

City & State

SARASOTA, FL

City & State

SARASOTA, FL

Zip

34241

Zip

34233

Country

4. FEI Number

65-0650385

Applied For

Not Applicable

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name *BOBBIE PETZOLDT*

Street Address (P.O. Box Number is Not Acceptable)

5132 WILLOW LEAF DR

City *SARASOTA*

FL

Zip Code *34241*

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.

SIGNATURE *Robert S. Petzoldt*

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

*4-12-02*

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

January 1-2 May 1- Fee is \$150.00  
After May 1- Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

ROBERTA S. PETZOLDT  
5132 WILLOW LEAF DR.  
SARASOTA, FL 34241

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

13. I hereby 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 report or 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE *Robert S. Petzoldt*

*4-12-02*