**PROFIT** CORPORATION ANNUAL REPORT

1999°



FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P96000029288

1. Corporation Name

DECORATORS TOUCH WINDOW FASHIONS, INC.

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Principal Place of Business	Mailing Address
1733 CORAL TERR N LAUDERDALE FL 33068	1733 CORAL TERR N LAUDERDALE FL 33068
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## Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90164 007 \*\*\*150.00



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Principal Plac	e of Business	Mailing Address						10:07:00:100:
1733 CORAL TI N LAUDERDALE		1733 CORAL TERR N LAUDERDALE FL 33068						
						DO NOT WRITE IN TH	IS SPACE	
						3. Date Incorporated or Qualifed 03/29/1996		-
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Ar	plied For
21		26				65-0655685	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certificate of Status Desired	\$8.75	Additional
22		27				5. Certifcate of Status Desired	Fee Re	equired
City & Stat	e	City & State	-		سید	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip	Country	Zip	Coun	ntry		8. This corporation owes the current year	Intangible	
· Δ	25	29	$\neg$			Personal Property Tax.	Ŭ Yes	□No
	9. Name and Address of Current	<del></del>				10. Name and Address of New Registers	ed Agent	
				81 Nam	ne			
	LUNG, RALPH D			82 Stre	-1 0 444-	ess (P.O. Box Number is Not Acceptable)		
1733	CORAL TERRACE			ozi Sue	BI WOOLE	ss (F.O. Box Number is Not Acceptable)		ļ
AL LA	UDERDALE FL 33068		}	$\rightarrow$				
N LA	IODENDALL FL 33000			83				
N LA	ODENDALL FC 33000		L					
N LA	ODENDALE PE 33000		L	84 City		F	85 Zip	Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607 0502	if Florida. Such change was auti	, the ab	84 City	ed corpo	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its	registered
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	of Florida. Such change was autions of, Section 607.0505, Florid	, the ab norized a Statut	84 City cove-name by the co	rporatio	oration submits this statement for the purpose n's board of directors. I hereby accept the app	of changing its pointment as re	registered
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14. 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 annual report or supplemental annual 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 Accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cha

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

□ DELETE

DELETE

☐ Change

Change

☐ Addition

☐ Addition