**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700045527

1. Corporation Name

DECO SOUTH, INC.

## **FILED** Jun 01, 1999 8:00 am **Secretary of State**

06-01-1999 90011 035 \*\*\*150.00



Principal Place	e of Business	Mailing Address					
STE. 690B. 8401 9TH ST. N. STE. 690		STE. 6908. 8401 9TH ST. N.	. 690B. 8401 9TH ST. N.				
ST. PETERSBUI	RG FL 33702	ST. PETERSBURG FL 33702			DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed		
					05/21/1997		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	T A	pplied For
<del>-</del>	ace of Dusiness	26			59-3449880	<del></del>	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				<del></del>	Additional
22		27			5. Gertifcate of Status Desired	•	equired
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28		Trust Fund Contribution	•	to Fees	
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current year	Intangible	
24	25	29	0		Personal Property Tax.	☐ Yes	(XNO
	9. Name and Address of Current		1		10. Name and Address of New Register	ed Agent	
				81 (Name	1. 1.7 5 5		-
CORPORATION SERVICE COMPANY			}	82 Street	Address (P.O. Box Number is Not Acceptable)		
1201 HAYS STREET					2-110th Ave. N. #813		i
TALLAHASSEE FL 32301-2525			Ī	83			1
						05 7:-	<u> </u>
				84 City	Pedarch		Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the above named comporation submits this statement for the purpose of changing its registered							
Office or r	egistered agent, or both, in the State of in-familia with, and accept the obliget	nt Florida. Such change was auti	nonzea	by the corp	oration's board of directors. I hereby accept the ap	pointment as r	egistered
_	irriamiliar wuri, and accept the magac	for Soi, Gentler 601.0300, Florid	ا الدادة الد	165.	5.2	2-99	i
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE, R	egistered.	Agent signature	required when reinstating) DATE		
12.	OFFICERS ANI	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D	☐ DELETE	1.1 <b>T</b> IT	LE		Change	☐ Addition
NAME	EVANS, RICHARD D		1.2 NA	ME			
STREET ADDRESS	STE. 690B, 8401 9TH ST. N.		1.3 \$11	REET ADDRESS			
City-ST-ZIP	ST. PETERSBURG FL 33702	_	1.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	2.1 TIT	TE .		☐ Change	☐ Addition
NAME			2.2 NA	ME			}
STREET ADDRESS			2.3 ST	REET ADDRESS			\
CITY-ST-ZIP			2. 4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	3.1 TIT	LE		Change	Addition
NAME			3 2 NA	ME	Ì		}
STREET ADDRESS			3.3 STI	REET ADDRESS			
CITY-ST-ZIP			34 CI	TY-ST-ZIP			
TITLE		☐ DELETE	4.1 TIT	LE		Change	☐ Addition
NAME			4. 2 NA	ME			
STREET ADDRESS			4.3 STI	REET ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT			Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT	LE		Change	☐ Addition
NAME	2		6.2 NA	ME			
STREET ADDRESS	•		6.3 ST	REET ADDRESS			
			-		I .		

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 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 attachment with an address, with all other like empowered.

CR2E034 (11/98)