

2004 FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P97000066775

1. Entity Name
VILLA DECO INTERIORS, INC.



FILED
04 NOV -1 PM 4:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**12277 SW 132 COURT
MIAMI, FL 33186**

Mailing Address
**12277 SW 132 COURT
MIAMI, FL 33186**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country



10212004 REIN-P CR2E098 (6/04)

4. FEI Number
65-0771124

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**VILLAZON, ANDRES
12277 SW 132 COURT
MIAMI, FL 3**

7. Name and Address of New Registered Agent
Name **Lydis Villazon**
Street Address (P.O. Box Number is Not Acceptable)
12277 SW 132 CT
City **Miami** FL Zip Code **33186**

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 ☒ **Lydis Villazon** DATE **10/28/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLAZON, ANDRES 12277 SW 132 COURT MIAMI, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	700042354317 11/01/04--01058--008 **150.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ☒ **Lydis Villazon** DATE **10/28/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR