


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

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Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90066 028 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000103617					
1. Corporation Name DECO DECK, INC.					
Principal Place of Business 153 SEVILLA AVE. CORAL GABLES FL 33134			Mailing Address 153 SEVILLA AVE. CORAL GABLES FL 33134		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		12/08/1997	
22 City & State		27 City & State		4. FEI Number	
23 Zip Country		28 Zip Country		65-0800873	
24		25		29	
24		25		29	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
M.J.F. REGISTERED AGENT CORP. 153 SEVILLA AVE. CORAL GABLES FL 33134			81 Name		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
			84 City		
			FL 85 Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
12. OFFICERS AND DIRECTORS					
1.1 TITLE P/S					
1.2 NAME MARINIER, GILBERT					
1.3 STREET ADDRESS 13251 SW 192ND ST.					
1.4 CITY-ST-ZIP MIAMI FL 33177					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					



DO NOT WRITE IN THIS SPACE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/99

Date

(305) 442-1567

Daytime Phone #

CR2E034 (11/98)