
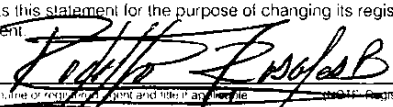
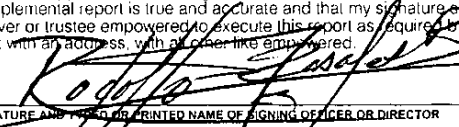


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2008 8:00 am**  
**Secretary of State**

04-23-2008 90043 033 \*\*\*150.00

<b>DOCUMENT # P98000019821</b> 1. Entity Name <b>UNLIMITED DECORATING SERVICES INC</b>																													
Principal Place of Business <b>612 NW 13 ST., #23</b> <b>BOCA RATON, FL 33486</b>			Mailing Address <b>612 NW 13 ST., #23</b> <b>BOCA RATON, FL 33486</b>																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		Zip																									
Country		Country		4. FEI Number <b>65-0816557</b>																									
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable																									
6. Name and Address of Current Registered Agent <b>ROSALES, RODOLFO</b> <b>612 NW 13 ST., #23</b> <b>BOCA RATON, FL 33486</b>				7. Name and Address of New Registered Agent Name <b>Rodolfo Rosales</b> Street Address (P.O. Box Number is Not Acceptable) <b>608 N.W. 13th St. #31</b> City <b>Boca Raton</b> <b>FL</b> Zip Code <b>33486</b>																									
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:  DATE: <b>4/21/08</b>																													
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">D</td> <td style="width: 30%;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>ROSALES, RODOLFO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>612 NW 13 ST., #23</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>BOCA RATON, FL 33486</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Delete	NAME	ROSALES, RODOLFO		STREET ADDRESS	612 NW 13 ST., #23		CITY- ST- ZIP	BOCA RATON, FL 33486		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 40%;">D</td> <td style="width: 30%;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>ROSALES RODOLFO</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>608 N.W. 13th St. #31</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>BOCA RATON, FL 33486</td> <td></td> </tr> </table>			TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	ROSALES RODOLFO		STREET ADDRESS	608 N.W. 13th St. #31		CITY- ST- ZIP	BOCA RATON, FL 33486	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  DATE: <b>4/21/08</b>																													