## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90042 044 \*\*\*150.00

1999		DIVISION OF CORPORATIONS
DOCUMENT # F	980000	032590
ART DEC	CO & DE	SIGNS, INC
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7228 W OAKLAND PARKBLVD LAUDERHILL, FL. 33313-1041281					DO NOT WRITE IN THIS SPACE						
LA	UDEKATLL	, I-L. 350,	19-104	122	8/	3. Date incorporated or Qualifed	98	- NOL	-		
. Principal Pl	ce of Business 2a. Mailing Address			4. FEI Number Applied For Not Applied For Not Applied For							
Suite, Apl.	#, etc.		Suite, Apt. #, etc.			- \$8.75 Addition					
[ 27]						5. Certificate of Status Desired Fee Re				quired	
City & State	e	City & Star				Election Campaign Financing     Trust Fund Contribution		•	.00 M		
Zip	Country Zip Country 29 30			1	8. This corporation owes the current year Intangible Personal Property Tax.						
i	9. Name and Address of Cu					10. Name and Address of New Re	gistered A	gent			
PERI	EZ DAVID			81	Name	Α					
PEREZ, DAVID 7228 W OKLAND PARK BLVD				82	Street A	Address (P.O. Box Number is Not Acceptable)					
	UDERHILLI			83							
	/•	,	_,	84	City		FL	85	Zip Co	de	
office or r	to the provisions of Sections 607 egistered agent, or both, in the Sim familiar with, and accept the ot	ate of Florida. Such cha	ange was author	rized by	the corpor	corporation submits this statement for the puration's board of directors. I hereby accept	urpose of ch	nangir ment	ng its re as regi	gistered stered	
SIGNATURE	Signature, typed or printed name of registered	and the state of t	ALOTE, D. W.			quired when reinstating)	DATE				
12.		AND DIRECTORS	(NOTE: Regis	13.	IN SIGNATURE (SI	ADDITIONS/CHANGES TO OFFI		DIRE	CTOR	S IN 12	
ITLE	PRSIDENT		DELETE	1.1 TIRE				Chi		Addition	
VA <del>l</del> E	PEREZ DAVID	1	1	1.2 NAME							
TREET ADDRESS	PEREZ DAVID 7228 WOKLAN	4D PARKB	LVD.	1.3 STREE	TADORESS						
ITY-ST-ZIP	LAUDERHILL, F	L.33313-10	4/281	1.4 CITY-5	ST-ZIP				_		
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IAME			1	22 NAME	1						
TREET ADDRESS			1	2.3 STREE	ET ADDRESS						
UY-ST-ZIP				2.4 CITY-	ST-ZIP					- Addition	
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CITY-ST-ZIP				4.4 CITY-S	ST-ZIP						
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WHE				5.2 NAME							
FREET ADDRESS				5.3 STREE	ET ADDRESS						
CITY-ST-Z#				5.4 CITY-5						<u> </u>	
nu.e			DELETE	6.1 TITLE					nange	Addition	
NAME	1		į	6.2 NAME							
STREET ADDIKESS			i	6.3 STREE	ET ADDRESS						

(CITY-ST-ZIP

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 changing in with an address, with all other like empowered.