

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 04, 2001 8:00 am**  
**Secretary of State**

06-04-2001 90009 010 \*\*\*150.00

**DOCUMENT # P98000050908**

1. Entity Name

**DECO DEVELOPMENT, INC.**

Principal Place of Business

**100 SOUTH ORANGE AVENUE  
 STE 300  
 ORLANDO FL 32801**

Mailing Address

**100 SOUTH ORANGE AVENUE  
 STE 300  
 ORLANDO FL 32801**

2. Principal Place of Business

**100 S. ORANGE AVE**

3. Mailing Address

**P.O. Box 620703**

Suite, Apt. # etc.

**SUITE 310**

Suite, Apt. # etc.

City & State

**ORLANDO FL**

City & State

**OVIEDO, FL 32762**

Zip

**32801**

Country

**USA**

Zip

**32762**

Country

**USA**

4. FEI Number

**59-3516581**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**QUILTY, PETER  
 100 S. ORANGE AVENUE, STE 300  
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
 (See criteria on back)

**FILE NOW!  
 After MAY 1, 2001  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete  
 NAME **ZUROMSKI, PAUL**  
 STREET ADDRESS **1210 LAKE WILLIS AVE CIR**  
 CITY-ST-ZIP **ORLANDO FL 32806**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 CITY-ST-ZIP

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRES** ☒ Change ☐ Addition  
 NAME **ZUROMSKI, PAUL**  
 STREET ADDRESS **100 S. ORANGE AVE, SUITE 310**  
 CITY-ST-ZIP **ORLANDO, FL 32801**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report or supplemental report, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**PAUL ZUROMSKI, PRES**

**4-25-01**

Date

**407-496-0870**

Daytime Phone #

CR2E034 (10/00)

*This form & check was  
 sent by deadline —  
 returned by Post  
 office.*

*Resubmitted 5-31-01*

*Thanks for your  
 consideration*

*Paul Zuromski  
 407-496-0870*