

2000 UNIFORM BUSINESS REPORT (UBR)

8.

FILED
Sep 18, 2000 8:00 am
Secretary of State

08-17-2000 90105 025 ***158.75

DOCUMENT # P99000011160

1. Entity Name

DECORATORS DELITE, INC.

Principal Place of Business

P O BOX 23192
 FT LAUDERDALE FL 33307

Mailing Address

P O BOX 23192
 FT LAUDERDALE FL 33307

2. Principal Place of Business

2587 E Rd
 Suite, Apt. #, etc.

3. Mailing Address

2587 E Rd
 Suite, Apt. #, etc.

City & State

Loxahatchee, FL

City & State

Loxahatchee, FL

4. FEI Number

52-2155690

Applied For

Not Applicable

Zip

33470

Country

USA

Zip

33470

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KINACK, JOSEPH N
 1785 NE 18 STREET
 FT LAUDERDALE FL 33304

7. Name and Address of New Registered Agent

Name: KINACK, JOSEPH N.
 Street Address (P.O. Box Number is Not Acceptable):
 2587 E Rd
 City: Loxahatchee FL Zip Code: 33470

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]

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

(NOTE: Registered Agent signature required when reinstating)

8/14/2000

DATE

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

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

| | |
|--|---------------------------------|
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] JOSEPH N. KINACK

8-14-2000

(561) 538497

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

*Attachment
p99000d11160
1088203*

Decorators Delite, Inc.

*Attachment
p99000d11160*

2587 E Road
Tallahassee, FL 32370

(561) 753-8488

1088203

August 14, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: 2000 Uniform Business Report

Dear Sir or Madam:

This is our first year filing a renewal of our corporate annual report. We have moved three (3) times since the corporations inception last year and we are unfamiliar with renewal procedures. We have just received notification of renewal for the first time postdated July 10, 2000. (See enclosed copy). We have been out of town doing business for the past three weeks doing business and we are filing now and would appreciate a waiver of the penalty.

We have contacted representatives and were told to file the normal fee of \$150.00 with the hopes it would be accepted.

Thank you kindly for your cooperation in this matter.

Sincerely,

Joseph N. Kinack, President
Decorators Delite, Inc.

JNK/tk