

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000043491

1. Entity Name

DECO FINANCIAL SERVICES, INC.

FILED

Feb 05, 2000 8:00 am  
Secretary of State

02-05-2000 90047 033 \*\*\*150.00

Principal Place of Business

17811 SW 152 COURT  
MIAMI FL 33187

Mailing Address

17811 SW 152 COURT  
MIAMI FL 33187-7771

C0018668



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12380 SW 82 Ave

Suite, Apt. #, etc.

3. Mailing Address

12380 SW 82 Ave

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-0132603

Applied For

Not Applicable

Zip

33156

Country

US

Zip

33156

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

TRIANA, YOLANDA Y  
17811 SW 152 COURT  
MIAMI FL 33187

7. Name and Address of New Registered Agent

Name

DAVID SIMON

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

12380 SW 82 Ave

City

MIAMI

FL

Zip Code

33156

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

*David Simon*

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!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

TITLE **D** ☒ Delete  
NAME **TRIANA, YOLANDA Y**  
STREET ADDRESS **17811 SW 152 COURT**  
CITY-ST-ZIP **MIAMI FL 33187**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Add  
NAME **DAVID SIMON**  
STREET ADDRESS **12380 SW 82 Ave**  
CITY-ST-ZIP **MIAMI, FL 33156**

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

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

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

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

TITLE ☐ Change ☐ Add  
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)(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:

*David Simon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/00

Date

305 234-2797

Daytime Phone #