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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000105730 1. Entity Name 06 HAR 15 PH 4: 10 Deco Collection, Inc. SECRETAL TALLAHAS BEF. TICADA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 843 Washington reinstatement o Suite, Apt. #, etc. Suite, Apt. #, etc City & State City & State 4. FEI Number Applied For 65-0965573 Miami Beach Not Applicable Zip 33139 Country Zip Country \$8.75 Additional 5. Certificate of Status Desired US Fee Required 7. Name and Address of Current Registered Agent Name Brian Botton DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 843 Washington ^{City} Miami Beach 33139 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 registeres 03/10/2006 SIGNATURE (NOTE Registered Agent signature required when reinstating) January 1 Let | Fee is \$150.00 After May 1, Fee is \$550.00 9. Election Campaign Financing \$5.00 May Be Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE TILE CR2E034B (12/02) President HAME Brian Botton HAME 700069444857 04/04/06--01054--014 **1050.00 843 Washigton Ave. STREET ADDRESS STREET ADDRESS Miami Beach, FI 33139 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST 7iP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE TITLE

12. 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 it 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 on an attachment with an address.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CIFY-\$1-26P

Brian Botton

03/10/06

954-323-6300

Dete

Daytime Phone #

DECO COLLECTION, INC.

March 10, 2006.

Division of Corporations P.O. Box 1500 Tallahassee, Fl 32302-1500

Dear Sir or Madam:

Please be advised that the mailing address for my corporation has changed and I never received my corporation renewal UBR forms..

As per the instructions that I received when calling your office in reference to this matter, I have enclosed a UBR that I have filled out with my new address along with a check to cover the filing fees to update my corporation.

Please accept the enclosed report and payment for \$1050.00 in full satisfaction of my 2000 TO 2006 filing requirements.

Thank you.

Brian Botton President