

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -1 AM 8:56

DOCUMENT # S65581 (8)

1. Corporation Name

ART-DECO SERVICES, INC.

Principal Place of Business

**3508 W. 14TH LANE
HALEAH FL 33012**

Mailing Address

**3508 W. 14TH LANE
HALEAH FL 33012**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1991

3a. Date of Last Report

01/20/1994

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

65-0278054

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution



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

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

21. Suite, Apt. #, etc

26. Suite, Apt. #, etc

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALAMO, MARIA
3508 WEST 14TH LANE
HALEAH FL 33012**

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(If the registered agent's signature is required when registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**PO
ALAMO, ARTHUR
3508 W. 14TH LANE
HALEAH FL**

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**SD
ALAMO, MARIA
3508 W. 14TH LANE
HALEAH FL**

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**VD
ALAMO, ROLANDO
3508 W. 14TH LANE
HALEAH FL**

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**TD
ALAMO, ROLANDO
3508 W. 14TH LANE
HALEAH FL**

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 changed, or on an attachment with an address.

SIGNATURE:

Rolando Alamo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROLANDO ALAMO

5-26-95 (557-2549)
Filing Date Filing Number