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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # S65581

1. Corporation Name ART-DECO SERVICES, INC.

Principal Place of Business

Mailing Address

FILED May 01, 1999 8:00 am Secretary of State 05-01-1999 90048 035 ***158.75



9721 MARLIN-RD MIAMILEL 33157-8739	9721 MARLIN RI MIAMI, FL 33151) 7 <i>-873</i> 9	DO NOT WRITE IN TH 3. Date Incorporated or Qualifed 07/08/1991	IIS SPACE	
2. Principal Place of Business	2a. Mailing Address	_	4. FEI Number	Applied For	
21 1 IOLI MAKLIN NU	26	_	65-0278054	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	_	5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		,6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 24 33 157 -8739 25 MIAMI DAN	Zip Cou 29 30	untry	This corporation owes the current year Personal Property Tax.	Intangible □ Yes S No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
ALAMO, MARIA		81 Name			
		82 Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
		83			
9721 MARLINKD MIAMI, FL 38157		84 City	F	L 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 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE ☐ Change 1,1 TITLE TITLE ALAMO, ARTHUR 1.2 NAME NAME 3598 W. 14TH LANE 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition SD ... DELETE 2.1 TITLE ☐ Change TITLE ALAMO, MARIA 22 NAME NAME 3598 W. 14TH LANE 2.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 2. 4 CITY-\$T-ZIP CITY-ST-ZIP ☐ Addition DELETE ☐ Change TITLE 3.1 TITLE ALAMO, ROLANDO 3.2 NAME NAME 3598 W. 14TH LANE 3.3 STREET ADDRESS STREET ADDRESS HIALEAH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TD TITLE ALAMO, ROLANDO NAME 4.2 NAME 3598 W. 14TH LANE STREET ADDRESS 4.3 STREET ADDRESS HIALEAH FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Сhange ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME KIDL HARTLE 5.3 STREET ADDRESS STREET ADDRESS () My () 1 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE ☐ Change Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZiP CITY-ST-ZIP

14. 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 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 pr on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)