## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # V70745**

1. Entity Name

DECORATIVE LIGHTING AND DESIGN MANUFACTURING, INC.



FILED Feb 22, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1850 NE 146 ST MIAMI, FL 33261-9500 US PO BOX 619500

MIAMI, FL 33133 US



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01312008 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAFONTISEE, LOUIS L JR 3121 COMMODORE PLAZA #301 MIAMI, FL 33133

## DO NOT WRITE IN THIS SPACE

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|---------------------------------------|---|--|--|--|
|                                       | named entity submits this statement for the plions of registered agent. | urpose of changing its registere                     | ed office or registered agent, or bo         | th, in the State of Florida. I am familiar with, and accept  |
| SIGNATURE.                            | Signature, typed or printed name of registered agent and little         | I applicable. (NOTE: Registered                      | d Agent signature required when reinstating) | DATE   |
|                                       | E NOW!!! FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.00             | Election Campaign Finan     Trust Fund Contribution. | scing \$5.00 May Be Added to Fees            | 500000834487<br>02722708-80054-018 150 00  |
| 10.                                   | OFFICERS AND DIREC  | CTORS  |  | - John Bar Garage  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD<br>FARREY, JOHN F.<br>1850 NE 146 ST.<br>MIAMI, FL                   |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP<br>FARREY, JR, F.X.<br>1850 NE 146TH STREET<br>MIAMI, FL 33181       |  |  |  |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME

STREET ADDRESS
CITY-ST-ZIP

JOHN F FARREY



2/20/2008 305-947-5451

Date

Daytime Phone #