

3-17-97 B-3117 NC
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FILED
 Mar 17 1997 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF REVENUE
 Sandra B. Morone
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # J11439 (3)
 1. Corporation Name
ARTISTIC WAYS, INC.

Principal Place of Business: 5305 EHRlich ROAD TAMPA FL 33625
 Mailing Address: 5305 EHRlich ROAD TAMPA FL 33625-5534

2. Principal Place of Business
 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

9. Name and Address of Current Registered Agent
**FLEAT, ERIC I.
 16508 HUTCHINSON RD.
 ODESSA FL 33558**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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 _____ (NOTE: Registered agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		1
TITLE	P	<input type="checkbox"/> DELETE
NAME	FLEAT, ERIC L	
STREET ADDRESS	16508 HUTCHINSON RD.	
CITY - ST - ZIP	ODESSA FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	FLEAT, SAMANTHA	
STREET ADDRESS	16508 HUTCHINSON RD	
CITY - ST - ZIP	ODESSA FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	FLEAT, SHANNON	
STREET ADDRESS	16508 HUTCHINSON RD.	
CITY - ST - ZIP	ODESSA FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

3. Date Incorporated or Qualified: 04/25/1986
 3a. Date of Last Report: 03/01/1996
 4. FEI Number: 59-3000684
 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

10. Name and Address of New Registered Agent

1 Name
 2 Street Address (P.O. Box Number is Not Acceptable)
 3
 4 City FL 85 Zip Code

I, _____, have named corporation submits this statement for the purpose of changing its registered agent by the corporation's board of directors. I hereby accept the appointment as registered agent.

SIGNATURE _____ DATE _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7	<input type="checkbox"/> Change <input type="checkbox"/> Addition
8	<input type="checkbox"/> Change <input type="checkbox"/> Addition
9	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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, or on an attachment with an address.

SIGNATURE: *Shannon Fleat*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



CR2E034 (9/96)

3/12/97 813-962-8777
 Date Daytime Phone #