SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P92000003658 (1)

ARTISAN SERVICES, INC.  Principal Place of Business  706 16TH AVENUE N.W. CLEARWATER FL 34616		Mailing Address  706 16TH AVENUE N.W. CLEARWATER FL 34616		] [64] [64] [12] [13] [13] [13] [13] [13] [13] [13] [13	
				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal	Place of Business	2a. Mailing Address		11/05/1992 4. FEI Number	08/11/1995
21		26		59-3203622	Applied For
Suite, Apt	! #. etc	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
City & Sta	No.	27		5. Certificate of Status Desired	Fee Required
23	nte	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip		Trust Fund Contribution	Added to Fees
24	25	29	Country	8. This corporation has liability for i	itangible tax under s. 199 032.
	9. Name and Address of Curre	ent Registered Agent	30	Florida Statutes	Yes No
RC	ORTOLINI, RONALD A		81 Name	10. Name and Address of New Re	Istered Agent
706 16TH AVENUE N.W. CLEARWATER FL 34616			82. Street Ac	ldress (P.O. Box Number is Not Acceptabl	9)
•			84 City		<b>85</b> Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607-05 registered agent or both, in the Stal am lamiliar with, and accept the oblig	02 and 607,1508, Florida Stee e of Florida, Sucti change w gations of, Section 607,0505	atutes, the above-named co as authorized by the corpora , Florida Statutes	rporation submits this statement for the put tion's board of directors. Thereby accept	
SIGNATURE	Signature, type for printed rates of registered as				
12.		ND DIRECTORS	(NOTE: Registered Agent signature reg		DAIL
TITLE	D	DELETE	11 TIFLE	ADDITIONS/CHANGES TO OFFICE	
NAME	BORTOLINI, RONALD A	<u> </u>	1 2 NAME		Change Addition
STREET ADDRESS	706 16TH AVENUE N.W.		1 3 STHEET ADDRESS		
CITY - ST - ZIP	CLEARWATER FL 34616		1.4 City - ST-ZIP		
TITLE		DELETE	2.1 TIFLE		Change Add-tron
NAME			2.2 NAME		Change Add-thir
STREET ADDRESS			2 3 STREFT ADDRESS		
CITY - ST - ZIP					
NAMÉ			2 4 CrTY - ST - ZIP		
		DELETE	3 1 TIFLE		Change Add non
_		DELETE	3 1 TIFLE 3 2 NAME		Change Add tion
STREET ADDRESS		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS		Change Add tion .
_			3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY - ST - ZIP		
STREET ADDRESS .		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TIFLE		Change Addition  Change Addition
STREET ADDRESS . CITY-ST-ZIP TITLE	· · ·		3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME		
STREET ADDRESS . CITY-ST-ZIP TITLE NAME	· · · · · · · · · · · · · · · · · · ·		3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS		
STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS			3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP 5 1 TITLE		Change Addition
STHEET ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TIFLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TIFLE 5 2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP		Change Addition  Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP		Change Addition  Change Addition

turther certify that the information indicated on this annual report or supplemental annual report is true and accurate and final riving signature shall have the same legal effect as if that man officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and GNATURE:

| Standard | Statutes | Statute

SIGNATURE: