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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90041 039 ***150.00

Change

☐ Addition

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000036417

1. Corporation Name

ART GLOBE, INC.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

l						<u>.</u>		8 1 (1 8 11 1881 1881
Principal Place of Business Mailing Address							giri ala	
17038 W DIXIE HWY 17038 W DIXIE HWY								
SUITE 176		SUITE 176				DO NOT WRITE IN THIS	SPACE	
N MIAMI BEACH FL 33160 N MIAMI BEACH FL 33160						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
US		US						
	· · · · · · · · · · · · · · · · · · ·	On Marting Address				05/20/1993 4. FEI Number		pplied For
2. Principal Place of Business 2a. Mailing Address								lot Applicable
21 26 Suite-Apt:#-etc						65-0414861	 	Additional
						5. Certifcate of Status Desired		Required
22 27 City & State City & State						A 51 for One store Storening		
_	├ ── `	s State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	28	Zip Country					
<u> </u>			30			8. This corporation owes the current year Intangible Personal Property Tax.		
24	9. Name and Address of Current	t Registered Agent	30]			10. Name and Address of New Registered		
<u> </u>	J. Name and Address of Current	Legistoren Agent		B1	Name	to traine and reduced of the tellionists	-g -,,,	
SVF	TLANA IANOVSKI							
18041 BISCAYNE BLVD.				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 1205				B3				
N MIAMI BEACH FL 33160				"				
IN MAILMAN DEPOSITIE 20100				84	City		85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,								
agent. I a	m familiar with, and accept the obligat	WOWL 15UE14	TNA 1	41/	OUSK i/			
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	VP	DELETE 1.1 T		E			Change	Addition
NAME	ianovski, neila			1.2 NAME				
STREET ADDRESS 18041 BISCAYNE BLVD., STE. 1204			1.3 STR	1,3 STREET ADDRESS				
CITY-ST-ZIP	N MIAMI BEACH FL 33160			1.4 CITY-ST-ZIP				
TITLE	☐ DELETE 2.1			E		_	Change	☐ Addition
NAME `			2.2 NAW	Æ.				
STREET ADDRESS			23 STR	EETA	ADDRESS			
CITY-ST-ZIP			2. 4 CIT	Y-ST-	-ZIP			
TITLE		DELETE	3.1 TITL	E	Ţ		☐ Change	☐ Addition
NAME			3.2 NAM	Æ				
STREET ADDRESS			3.3 STR	EETA	ADDRESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-	ZIP			
TITLE	DELETE 4			4.1 TITLE			Change	☐ Addition
NAME			4. 2 NA	ΜE				
STREET ADDRESS			4.3 STR	EETA	ADDRESS			
CITY-ST-ZIP	1		4.4 CITY					_
TITLE		☐ DELETE	5.1 TITL				Change	☐ Addition
NAME					1			
I			5.2 NAM	/E		•		
STREET ADDRESS			8		ADDRESS			
STREET ADDRESS			8	EETA				

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 or on any attachment with an address, with all other like empowered. SIGNATURE:

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ DELETE