## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P93000061906 (	(2)
	P93000061906 (

## FINE DESIGN INCORPORATED

Principal Place of Business

Mairing Address



2. Principal Place of Business   2a. Making Address   25   25   25   25   25   25   25	4821 ROND CORAL GAS	A ST BLES FL 33146	4821 RONDA ST CORAL GABLES F	FL 33146		3. Date Incorporated or Qualified	3a. Date of Last Report
Suito, Apt. 4, etc.							03/14/1995
Subject April 6, etc.    Subject April 6, etc.   Subje	2. Principal P	lace of Business	2a. Mailing Address				Applied For
City & State   Country   28   Country   29   Country   29   Country   29   29   30   Country   29   S. Thist ford Contribution   Caded to Fe   No   Registered Agent   S. Thist concentration   Caded to Fe   Registered Agent   S. Thist concentration   Caded to F	21		26			65-0433904	Not Applicable
Zep	<del></del>	#, etc.	,	3.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Section   Part	<u> </u>	e	F				\$5.00 May Be Added to Fees
9, Name and Address of Current Registered Agent    BI   Name	Zip	Country	Zip	Country		8. This corporation has liability for in	ntangible tax under s. 199.032,
LIPPINCOTT, ELWOOD T JR 25 W FLAGLER ST MIAMI FL 33130  18 Street Address (P.O. Box Number is Not Acceptable)  19 Street Address (P.O. Box Number is Not Acceptable)  11. Parsant to the provisions of Sections 807,000 and 507,1508, Forials Statutes, the above named corporation submits this statement for the purpose of changing its register or registered sport, or both in two State of Floods Statutos.  11. Parsant to the provisions of Section 807,0500 and 507,1508, Forials Statutos.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1911 THE SHIPELY LIPPINCOTT 12 NAME  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1911 THE CORAL GABLES FL.  15. CORAL GABLES FL.  16. DELFIE 2 1 THE 1911 CORAL GABLES FL.  16. CORAL GABLES FL.  17. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 24 ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 24 ADDRESS COLV. ST-7P  18. THE MAME 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. THE MAME 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 3 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 3 SHIPELY ADDRESS 5 SHIPELY ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SHIPELY ADDRESS COLV. ST-7P  18. DELFIE 5 SHIPELY ADDRESS 5 SH	24		25 29 30				
LIPPINCOTT, ELWOOD T JR 25 W FLAGLER ST MIAMIF EL 331300  83  84  City FL 85 Zap Code  11. Pursuant to the provisions of Sections 607.0500 and 607.1508, Favida Statutes, the above named corporation submits this statement for the purpose of changing the register or registered agent, or both in the State of Foods. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's board of directors. Thereby accept the appointment as registered agent and provided by the corporation's boar		g. Name and Address of Curi	rent Registered Agent		т	10. Name and Address of New R	egistered Agent
### City FLORENST   ### City FLORENS   ### City FLO				81	Name		
## City ## Company to the provisions of Sections 607,050P and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 familiar with, and accept the obligations of, Socion 607,0505, Florida Statutes.  ### SUBMATURE    Superior, layer for principal or displaned a part of a society   ACCEPT   Appatition 2 part of the obligations of the principal or displaned a part of a society   ACCEPT   Appatition 2 part of the principal or displaned a part of a society   ACCEPT   Appatition 2 part of the principal or displaned a part of a society   ACCEPT				82	Street Addr	ress (P.O. Box Number is Not Acceptable	le)
1. Pursuant to the provisions of Sections 607.050/2 and 627.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 familiar with, and accept the obligations of, Section 627.0505, Florida Statutes.    SIGNATURE				83			
or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. It nereby accept the approximent as registered agent familiar with, and accept the octigations of, Section of). C/GOS, Florida Statutors.  SIGNATURE  12. OFFICE'RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE CHANGE STATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE CHANGE STREET ADDRESS IN THE C				84	City	W/ANNING A	85 Zip Code
TILLE DPT DELFIE 1.1 IILE SHRELY LIPPINCOTT 1.2 I MAME SHEET ADDRESS COPAL GABLES FL 1.3 SHRELF ADDRESS COPAL GABLES FL 1.4 CHY-ST-ZIP 1.5 THEE ADDRESS CHY-ST-ZIP 1.5 THE ADDRESS CHY-ST-ZIP 1.5 THEE ADDRESS CHY-ST-ZIP 1.5 THE ADDRESS CH	or registe familiar w	ored agent, or both, in the State of Fl with, and accept the obligations of, Si	orida. Such change was aut ection 607.0505, Florida Sta	horized by the cor tutes.	poration's boa	rd of directors. I hereby accept the appo	omtment as registered agent. I am
TITLE	12				ant signature require		
NAME			www		·	725110107070774020 10 0171	
1.3 STREET ADDRESS   4821 RONDA ST   CORAL GABLES FL							
CORAL GABLES FL							
TITLE							
NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  DELETE  4.1 DILE  A3. STREET ADDRESS  CITY - S1 - 7/IP  TITLE  A4. CITY - S1 - 7/IP  TITLE  NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  NAME  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY - S1 - 7/IP  TITLE  STREET ADDRESS  STREET ADDRES		OUNE OFFICE A	DELFTE				Change Addition
23 STREET ADDRESS   23 STREET ADDRESS   24 CITY - ST - ZIP			_	2 2 NAME			
CHY-S1-7IP         24 CHY-S1-7IP           TITLE         DELFIE         3 1 HILE         Change            NAME         32 NAME   <				2.3 \$169	T ADDRESS		
TITLE				2 4 CITY	ST-ZIP		
STREET ADDRESS   3.3. STREET ADDRESS   1.7. ST. ZIP   1.7. STREET ADDRESS   1			DELFTE				Change Addition
DELETE	NAME			3.2 NAMI			
TITLE         DELETE         4.1 TITLE         Chaqge         1           NAME         42 NAME         4.3 STREET ADDRESS         4.3 STREET ADDRESS         5.7 FEET ADDRESS         4.4 CITY-ST-ZIP         1         Change         1           TITLE         DELETE         5.1 TITLE         Change         1<	STREET ADDRESS			3.3. STRE	ET ADDRESS		
NAME	CITY - ST - ZIP			3.4 CITY	SI-ZIP		
STREET ADDRESS	TITLE		DELETE	4. 1 THLI			Change Addition
A4 CITY-ST-7IP	NAME			4.2 NAMI			
TITLE         DELETE         5 1 THLE         Change         Change           NAME         5 2 NAME         5 2 NAME           STREE1 ADDRESS         5 3 STREE1 ADDRESS         CITY-S1-ZIP           TITLE         DELETE         6 1 THLE         Change           NAME         62 NAME         CRAME	STREET ADDRESS			4.3 STRE	I ADDRESS		
NAME         5 2 NAME           STREET ACORESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5 4 CITY-ST-ZIP           TITLE         DELETE         6 1 TITLE           NAME         62 NAME	CITY-ST-7IP			4.4 CITY	ST-ZIP		
5.3 STREE1 ADDRESS     5.3 STREE1 ADDRESS     CITY-S1-ZIP     54 CITY-S1-ZIP     Change	TITLE		[]] DELETE	5 1 1111			Change Addition
CITY-S1-ZIP         54 CITY-S1-ZIP           TITLE         DELETE         6 1 TITLE           NAME         62 NAME	NAME			5 2 NAM			
TITLE         DELETE         6.1 TITLE         Change	STREET ACORESS	;		5.3 STRE	E1 ADDRESS		
NAME 62 NAME	CITY-ST-ZIP			5 4 CITY	· \$1 - ZIP		
	TITLE		DELETE	6 1 TITL			Change  Addition
STREET ADDRESS 6.3 STREET ADDRESS	NAME			62 NAM			
•	STREET ADDRESS	;		63 STRE	ET ADDRESS		
CITY-ST-ZIP 64 CRY-ST-ZIP 64 CRY-ST-ZIP 64 CRY-ST-ZIP 19 Control of the prophy codify that the information surrolled with this filing is voluntarily furnished and does not qualify for the execution stated in Section 119.07(3)(b). Florida Statutes, I filing is voluntarily furnished and does not qualify for the execution stated in Section 119.07(3)(b). Florida Statutes, I filing is voluntarily furnished and does not qualify for the execution stated in Section 119.07(3)(b). Florida Statutes, I filing is voluntarily furnished and does not qualify for the execution stated in Section 119.07(3)(b). Florida Statutes, I filing is voluntarily furnished and does not qualify for the execution stated in Section 119.07(3)(b).							

reor making certify that the information indicated on this annual report or supplies with this ining is voluntary infringer and does not quality for the exemption stated in section 119.07(5)(i), Fronta Statutes, Trunner certify that the information indicated on this 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.

8 4/30/96