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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000049003 (4)**
1. Corporation Name
ERSKINE - SHEEHY ILLUSTRATIONS & DESIGNS, INC.

Principal Place of Business Mailing Address
6801 NW POWERLINE AVE. SUITE 104 FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/27/1994	3a. Date of Last Report N/A
21. Suite, Apt #, etc	22. City & State	23. Zip	24. Country	4. FEI Number 16-000003 65-0500003	Applied For Not Applicable
25. Zip	26. Country	27. Zip	28. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent
**ERSKINE, DONALD
6801 NW POWERLINE AVE.
SUITE 104
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent
81 Name **DONALD ERSKINE**
82 Street Address (P.O. Box Number is Not Acceptable) **6801 POWERLINE RD**
83 **SUITE 104**
84 City **FT. LAUDERDALE FL** 85 Zip Code **33309**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 Donal G. Erskine **DONAL G. ERSKINE** DATE **4/3/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ERSKINE, DONALD	12 NAME	
STREET ADDRESS	6801 NW POWERLINE AVE., SUITE 104	13 STREET ADDRESS	700001455337
CITY ST ZIP	FT. LAUDERDALE FL 33309	14 CITY ST ZIP	-04/13/95--01017--005
TITLE	D	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEEHY, ANDREW V	22 NAME	
STREET ADDRESS	6801 NW POWERLINE AVE., SUITE 104	23 STREET ADDRESS	***200.00
CITY ST ZIP	FT. LAUDERDALE FL 33309	24 CITY ST ZIP	***200.00
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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: Donal G. Erskine **4/3/95** **305 9776250**