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

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| DOCUMENT # | P94000051610 | (1) |

AOUADUM AOTIOAA

AQUARIUM ARTISANS, INC.

Principal Place of Business Mailing Address 6661 NW 33RD WAY 6661 NW 33RD WAY FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 3. Date incorporated or Qualified 3a. Date of Last Report 07/13/1994 05/11/1995 2a. Mailing Address 4. FEI Number Principal Place of Business Applied For 65-0505030 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5 Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No 24 25 30 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CENTORE, EVA Street Address (P.O. Box Number is Not Acceptable) 6861 NW 33RD WAY FT LAUDERDALE FL 33309 83 84 City Zip Code 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. pathics typed or production in of registered assert and to sit applicate OFFICERS AND DIRECTORS 12 13. ADD/HONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 □ DELETE TITLE Change Addition 1. 1 Tifle CENTORE, EVA NAME 1.2 NAME 6661 NW 33RD WAY STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33309 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change THILE ☐ Addition 2 1 TOLE CIPOLLA, ROBERT NAME 2.2 NAME 6661 NW 33RD WAY STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL 33309 CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE ☐ Addition THILE 3 1 TOLE ☐ Change NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CHTY - ST - ZIP TITLE DELETE 4 1 TITLE ☐ Change Addition NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5 1 files ■ Addition

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this arrival report or supplemental annual report is from 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 3 if changed, or on an attachment with an address.

5.2 NAME

6 1 DILE

6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

NAME

THTLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY - ST - ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4-17-96 954-968-1776

Change

Addition

CR2E034 (12/95)