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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700005830 (9)

G AND F FINE ART, INC.

FILED Apr 24 1998 8:00 am Secretary of State



Principal Place of Business	Mailing Address		4 TANENTANDE LIA ERIIN KOONE RÜREN ORENE ORUNE OORINER	Birai riirai ohene iniin tähis 1884
8141 HAMPTON WOOD DRIVE	8141 HAMPTON WOOD DE	RIVE		
BOCA RATON FL 33433	BOCA RATON FL 33433		DO NOT WRITE IN THI	S SPACE
·			3. Date Incorporated or Qualified	
			01/21/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 7 22 699	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.		67-0722011	Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the o	
24 25		30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
g, Name and Address of Cur	tent Registered Agent	81 Name	10. Harrie and Address of New Hegistere	o Agoin
MILLER, JOHN P				
2499 GLADES ROAD SUITE 305A		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33431		83		
BOOM INTORT E 33401		84 City		85 Zip Code
			F	
11. Pursuant to the provisions of Sections 607.0	0502 and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered
agent. I am familiar with, and accept the ob	ligations of, Section 607.0505, Flor	ida Statutes.		,
SIGNATURE Signature, typed or printed name of registered	ALCOY.	Registered Agent signature requi	red when reinstating) DATE	
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE PRESIDENT	☐ DELETE	1.1 TITLE		Change Addition
NAME HAGOS GACPARIA	AN	1.2 NAME		
STREET ADDRESS 8141 HAMMON WOL	D Dr	1.3 STREET ADDRESS		
CITY-ST-ZIP SUCA CATOU T	33431	1.4 CITY-ST-ZIP		Change Addition
TIME VICE PICES TENT	DELETE [_] DELETE	2.1 TITLE		Change - Addition
Ti i a aa a a a a a a a a a a a a a a a	لاحت حدد ۱۷۲۰	2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP GAA KATON FU	32477	2. 4 CITY-ST-ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY-ST-ZIP		
TITLE	L_] DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		5.2 NAME		22
STREET ADDRESS		5.3 STREET ADDRESS		11.711
CITY-ST-ZIP		5.4 CITY-ST-ZIP		4.24
TITLE	☐ DELETE	6.1 TITLE	5000024991 -04/24/98010221	-H-Change Addition
NAME		6.2 NAME	***150.00	UU8
STREET ADDRESS		6.3 STREET ADDRESS	***!OU.UU	
CITY-ST-7IP		6.4 CITY - ST - ZIP		ŀ

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 an autoriment with an address.

561) 883-2919

4/14/1998