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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 03 1997 8:00am

Secretary of State

1/28/91 343-2437

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 582853

(8)

CERAMIC ARTS, INC.							
Principal Place of Business Mailing Address 6967 SUNSET DRIVE SOUTH SOUTH PASADENA FL 33707 SOUTH PASADENA FL 33707-2817							
					3. Date Incorporated or Qualified 08/21/1978	3a. Date of Last R 01/26/1996	Report
2. Principal Pi	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		pplied For
21		26		59-1848080	 	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional	
22 City & State		City & State		Floating Operation Floating		equired	
23		28		Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country Zip		Country		This corporation has liability for in		
24	25 29 30		30			Yes No	1. 100,000,
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Reg	Jistered Agent	
	ASEK, RAYMOND A.		81	Name			
	SUNSET DRIVE SOUTH		82	Street Addres	ss (P.O. Box Number is Not Acceptabl	le)	
SOU	TH PASADENA FL 33707		02				
			83				
			} }	City	17 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -	- FL '	Code
onice or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m (Amiliar with, and accept the oblig	e of Florida. Such change was	is authorized by t	the corporatio	ration submits this statement for the pun's board of directors. I hereby accept		ts registered registered
SIGNATURE	Sanar or an of or printed name of regulation (s)	ext and till ill applicable. (N	IOTE Registered Agont	signature required	when reinetalings	*/2 7	
12.	OFFICERS AND DIRECTORS		13.	t a gridione responsa	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 TITLE			Change	Addition
NAME	WYPASEK, RAYMOND A.		1,2 NAME				
STREET ADDRESS	7510 PINE VALLEY LANE	LEY LANE		ADDRESS			
CITY-S1-ZIP	SEMINOLE FL	T bu cre	1.4 CITY - ST -	-ZIP			
TITLE	TD Wypasek, madelin g.	L. DELETE	2.1 TITLE			L Change	Addition
NAME STREET ADDRESS	7510 PINE VALLEY LANE		2.2 NAME	in abron			
CITY - ST - ZIP	SEMINOLE FL		2.3 STREET AL				
TILE	OLMITOLL I L	DELETE	2. 4 City-St- 3.1 Title	-ZIP		☐ Change	Addition
NAME		Name	3.2 NAME			L. Dikingo	L Nounion
STREET ADDRESS			3.3 STREET AL	ADDRESS			
CITY+ST+ZIP		3.		I-ZIP			
TILE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET AL	LOORESS			
CITY - S1 - ZIP		- I see one	4.4 CITY-ST-	- ZIP		·····	
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREET AL				
DITY-S1-7IP		DELETE	5.4 CITY-ST- 6.1 TITLE	-ZIP		☐ Change	Addition
NAME		- Petti	62 NAME			L. Cikinge	LJ Accilion
STREET ADDRESS			6.3 STREET AL	innaree			
CITY-ST-ZIP			64 CITY-ST-	` i			
14. I do hereb information I am an of	by certify that the information supplie in indicated on this annual report or s fficer or director of the corporation of in Block 12 or Block 13 if changed, o	supplemental annual report is or the receiver or trustee empo	alify for the exems true and accura	notion stated i	n Section 119.07(3)(i), Florida Statutes ny signature shall have the same legal as required by Chapter 607, Florida St	. I further certify that effect as if made un atutes; and that my r	the ider oath; that name