

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1892

1997 JUL 22 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F91977** (1)

1. Corporation Name
LAMP SHADES, ETC., INC.

Principal Place of Business 5402 W. ATLANTIC BLVD 5450 W. ATLANTIC BLVD 7894 W. COMMERCIAL BLVD MARGATE FL 33063 US	Mailing Address 5402 W. ATLANTIC BLVD 5450 W. ATLANTIC BLVD 7894 W. COMMERCIAL BLVD MARGATE FL 33063 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/22/1982	3a. Date of Last Report 04/19/1996
4. FEI Number 59-2224078	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 5402 W. ATLANTIC BLVD	2a. Mailing Address 5402 W. ATLANTIC BLVD
21. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
22. City & State MARGATE FL	28. City & State MARGATE FL
23. Zip 33063	29. Zip 33063
24. Country US	30. Country US

9. Name and Address of Current Registered Agent TED YOULOVSKY YOULOVSKY 6198 WINDING BROOK WAY DELRAY BCH FL 33484		10. Name and Address of New Registered Agent	
81. Name			
82. Street Address (P.O. Box Number is Not Acceptable)			
83.			
84. City	FL	85. 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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO GLADYS GOD GART YOULOVSKY 6198 WINDING BROOKWAY DELRAY BCH FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPSD TED YOULOVSKY YOULOVSKY 6198 WINDING BROOKWAY DELRAY BCH FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 attachment with an address.

CR2E034 (4/97)

pg 2 of 2

July 15, 1997

Division of Corporations
Att: - Annual Report Section
P.O. Box 6327
Tallahassee Fl. 32314

Dear Sir;

Please be advised that I received a Second Notice, but never received a First Notice. When I called Customer Service (Jeff) I was told that the notice might have been sent to Commercial Blvd. This store has been closed for ^{over} 3 years. Our new address is 5402 West Atlantic Blvd. Margate, Fl. 33063

We are a small business and would certainly never avoid paying your fee of \$165, knowing that if we didn't, it would jump to \$550; just keeping up with the monthly bills is tough enough. Therefore we try our very best to pay on time to avoid late charges. Should you review our credit you'll note this to be true.

I am therefore enclosing our check for \$165.00 and hope that after you review this matter you will accept this payment in full. I can assure you that I have marked this payment in my books for next year, before May 1st, 1998

Thank you for your consideration & attention in this matter.
Very truly yours,

Gladys S. Youlovsky, Pres. # 59-2224078