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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # G62359 (6)

1. Corporation Name
GREENE GALLERY, INC.

Principal Place of Business
1012 NORTH OCEAN BLVD
1105
POMPANO BEACH FL 33062
US

Mailing Address
1012 NORTH OCEAN BLVD
1105
POMPANO BEACH FL 33062-4017
US

3. Date Incorporated or Qualified 09/08/1983
3a. Date of Last Report 02/08/1996

2. Principal Place of Business
21 1012 N. Ocean Blvd.
Suite, Apt. #, etc. # 1105
22 City & State Pompano Beach, Fl.
23 Zip 33062 Country US
24 33062 25 US
26 1012 N. Ocean Blvd.
Suite, Apt. #, etc. # 1105
27 City & State Pompano Beach, Fl.
28 Zip 33062 Country US
29 33062 30 US

4. FEI Number 59-2319605
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
GREENE, BARBARA
1541 BRICKELL AVE
APT 1503
MIAMI FL 33129
*Not correct
changed previously*

10. Name and Address of New Registered Agent
81 Name GREENE, BARBARA
82 Street Address (P.O. Box Number is Not Acceptable) 1012 N. Ocean Blvd. #1105
83
84 City Pompano Beach, FL 85 Zip Code 33062

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 Barbara Greene Barbara Greene 4/21/96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE DP PRESIDENT
NAME GREENE, BARBARA
STREET ADDRESS 1012 NORTH OCEAN BLVD, # 1105
CITY-ST-ZIP POMPAN BEACH FL 33062
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PRESIDENT
1.2 NAME GREENE, BARBARA
1.3 STREET ADDRESS 1012 N. Ocean Blvd. #1105
1.4 CITY-ST-ZIP Pompano Beach, Fl. 33062
2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE Barbara Greene, Pres (Greene Gallery, Inc.) 4/21/96
754-942-3079

CR2E034 (9/96)