

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0026546

PROFIT CORPORATION
 ANNUAL REPORT
 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 SEP 29 AM 11:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # H47412

1. Corporation Name
 ARTISTIC FURNITURE FINISHING, INC.

Principal Place of Business
 % ROBERT BERAGLIA
 1811 S.E. 7TH STREET
 POMPANO BEACH FL 33060

Mailing Address
 % ROBERT BERAGLIA
 1811 S.E. 7TH STREET
 POMPANO BEACH FL 33060



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
 03/07/1985

4. FEI Number
~~59-2507740~~ 59 2507740 Applied For Not Applicable

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 owes the current year Intangible Personal Property Yes No

2. Principal Place of Business
 21. Suite, Apt. #, etc.
 22. City & State
 23. Zip
 24. Country

2a. Mailing Address
 26. Suite, Apt. #, etc.
 27. City & State
 28. Zip
 29. Country

9. Name and Address of Current Registered Agent

BERAGLIA, ROBERT
 1811 S.E. 7TH STREET
 POMPANO BEACH FL 33060

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

12. OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstating)

DATE

12. PD
 BERAGLIA, ROBERT
 1811 S.E. 7TH STREET
 POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE Change Addition
 2. NAME
 3. STREET ADDRESS
 4. CITY-ST-ZIP
 21. TITLE Change Addition
 22. NAME
 23. STREET ADDRESS
 24. CITY-ST-ZIP
 31. TITLE Change Addition
 32. NAME
 33. STREET ADDRESS
 34. CITY-ST-ZIP
 41. TITLE Change Addition
 42. NAME
 43. STREET ADDRESS
 44. CITY-ST-ZIP
 51. TITLE Change Addition
 52. NAME
 53. STREET ADDRESS
 54. CITY-ST-ZIP
 61. TITLE Change Addition
 62. NAME
 63. STREET ADDRESS
 64. CITY-ST-ZIP

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 -10/05/99--010992-1001
 ***550.00 ***550.00

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 by an attachment with an address

SIGNATURE: *Robert Beraglia*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-27-99
 954-782-5190
 Date Daytime Phone #

CR2E034 (5/99)