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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **J79317**

 Corporation Name ARTIS OPUS, INC.

## FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90072 006 \*\*\*150.00

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Principal Place	of Business	Mailing Address		(   {	it didit didit didit bibli diam tadı
70 PALMER AVE		70 PALMER AVE.			
WINTER PARK FL 32789-2530 WINTER PARK FL 32789-2530		0			
· -				DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualifed 06/18/1987	
2. Principal Pla	ace of Business	2a. Mailing Address	<del></del>	4. FEI Number	Applied For
21		26 ~ -		59-2827182	Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		g. Commence of Canada Double 1	Fee Required
City & State	9	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	Yes No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Register	ru Agent
POOI	l, Bernardine H		Name		
	ALMER AVE		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
, , , , ,	TER PARK FL 32789				<u> </u>
77071	ENTAINTE 32703		83		
1			84 City		85 Zip Code
				poration submits this statement for the purpose	C. A. Granden and C. A. Grande
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga Signature, typed or printed name of registered age	of Florida. Such change was all attons of, Section 607,0505, Floridations	thorized by the comporati	en's board of directors. I hereby accept the app	ointment as registered
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	POOL, BERNARDINE H.		1.2 NAME		
STREET ADDRESS	70 PALMER AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	<u>Win</u> ter Park FL		1.4 CITY-ST-ZIP		
TITLE	John Day	DELETE	2.1 TITLE	•	Change Addition
NAME		38 ( tall	2.2 NAME		
STREET ADDRESS	Jegge delle	2002	2.3 STREET ADDRESS		
CITY-ST-ZIP	200000000000000000000000000000000000000	20 x 5la 32784	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		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS	_		4.3 STREET ADDRESS		
CITY-ST-ZIP	-		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	,	
STREET ADDRESS			F A ATTRET ADDOCCO	,	
CITY-ST-ZIP			5.3 STREET ADDRESS	•	
			5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE		☐ DELETE		,	☐ Change ☐ Addition
NAME		☐ DELETE	5.4 CITY-ST-ZIP	,	☐ Change ☐ Addition
ĮĮ	<u> </u>	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	·	☐ Change ☐ Addition

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 attachment with an address, with all other like empowered.

SIGNATURE: