FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # J80297 (1)

1. Corporation Name
AVENUE ART CORPS, INC.

Principal Place of Business
5770 IRLO BRONSON HWY
KISSIMMEE FL 34742
US

Mailing Address
NOB HILL 602-3
N. SEMORAN BLVD.
WINTER PARK FL 32792
US

3. Date Incorporated or Qualified: 06/26/1987
3a. Date of Last Report: 05/11/1995
4. FEI Number: 59-2822577 — ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26 Nob Hill
Suite, Apt. #, etc.
27 610-2 N. Semoran Blvd.
City & State
28 Winter Park Fl.
Zip 29 32792 Country 30 U.S.

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**

GANN, ARTHUR L., JR.
1502 LAKEMONT AVE.
WINTER PARK FL 32792

10. **Name and Address of New Registered Agent**

81 Name: Gann, Arthur L., Jr.
82 Street Address (P.O. Box Number is Not Acceptable): 610-2 N. Semoran Blvd.
83 Winter Park
84 City: FL 85 Zip Code: 32792

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	GANN, ARTHUR L JR.	
STREET ADDRESS	NOB HILL 602-3 N. SEMORAN BLVD	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	D	☐ DELETE
NAME	GANN, CAROL LYNNE	
STREET ADDRESS	NOB HILL 602-3 N. SEMORAN BLVD	
CITY-ST-ZIP	WINTER PARK FL	
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	O	☒ Change ☐ Addition
1.2 NAME	Gann, Arthur L. Jr.	
1.3 STREET ADDRESS	Nob Hill 610-2 N. Semoran Blvd.	
1.4 CITY-ST-ZIP	Winter Park, Fl. 32792	
2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	Gann, Carol Lynne	
2.3 STREET ADDRESS	Nob Hill 610-2 N. Semoran Blvd.	
2.4 CITY-ST-ZIP	Winter Park, Fl. 32792	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Arthur L Gann Jr. ARTHUR L. GANN JR. June 10, 96 671-8791
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)