

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K42092

(2)

1. Corporation Name

FELLOUZIS FINE ARTS, INC.

Principal Place of Business

% TAMMY L. FELLOUZIS
521 W. COMMERCE DR.
LARGO FL 34640

Mailing Address

% TAMMY L. FELLOUZIS
521 W. COMMERCE DR.
LARGO FL 34640

APPROVED
AND
FILED

95 MAY -1 PM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/27/1988	3a. Date of Last Report 02/11/1994
4. FEI Number 59-2917403	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 has liability for intangible tax under S. 109.032, Florida Statutes ☒ 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	30
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9. Name and Address of Current Registered Agent

FELLOUZIS, TAMMY L.
521 W. COMMERCE DR.
LARGO FL 34640

10. Name and Address of New Registered Agent

81 Name Emmanuel L. Fellouzis	85 Zip Code 34641
82 Street Address (P.O. Box Number Not Acceptable) 3660 East Bay Drive	
83 Apt #421	
84 City Largo	FL

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 Emmanuel L. Fellouzis Emmanuel L. Fellouzis 4-19-95
Signature (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DP FELLOUZIS, EMMANUEL L. 2203 BARBARA DR. CLEARWATER FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	DP Fellouzis, Emmanuel L. 3660 East Bay Drive #421 Largo, FL 34641 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DT FELLOUZIS, TAMMY L. 2203 BARBARA DR. CLEARWATER FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	DT Fellouzis, Emmanuel L. 3660 East Bay Drive #421 Largo, FL 34641 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DS FELLOUZIS, TAMMY L. 2203 BARBARA DR. CLEARWATER FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	DS Fellouzis, Emmanuel L. 3660 East Bay Drive #421 Largo, FL 34641 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DVP FELLOUZIS, EMMANUEL L. 2203 BARBARA DR. CLEARWATER FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	DVP Fellouzis, Emmanuel L. 3660 East Bay Drive #421 Largo, FL 34641 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY, ST, ZIP	☐ Change ☐ Addition

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 110.07(5)(b), 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:

Emmanuel L. Fellouzis
Emmanuel L. Fellouzis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-95

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