SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

DOCUMENT # K58941 CONSTRUCTION ART PRODUCTS Principal Place of Business 409B W25T KALEY ST. 409B	Country 30 81 Name 82 Street Addn 4 O 83 84 City catutes, the above-named corporas authorized by the corporatio, Florida Statutes (NOTE. Registered Agent signature require	SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 1 / 18 / 89 4. FEI Number 5 9 - 2759 353 Not Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent ROBERT ELLIOTT RESS (P.O. Box Number is Not Acceptable) 9 B WEST KALEY ST. SRLANDO FL 85 Zip Code 3 2806 oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
CONSTRUCTION ART PRODUCTS Principal Place of Business 409 B W251 KALEY ST, HD9 B ORLANDO, FL. 3286 ORLAND E. Principal Place of Business Suite, Apt. #, etc. City & State City & State Zip Country Zip Zip 25 9. Name and Address of Current Registered Agent T. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida St office or registered agent, or both, in the State of Florida. Such change we agent. I am familiar with, and accept the obligations of, Section 607.0505 SIGNATURE AME TREET ADDRESS TO BELETE AME TREET ADDRESS TO ST. ST. ZIP ORLANDO, FL. 32866 TDELETE TILE AME THE COUNTY TO BELETE AME THE COUNTRY TO BELETE THE COUNTRY THE CO	Country 30 81 Name 82 Street Addn 4 O 83 84 City catutes, the above-named corporas authorized by the corporatio, Florida Statutes (NOTE. Registered Agent signature require	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 1 / 18 / 89 4. FEI Number 5 9 - 2759 353 Not Applied For Not Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent ROBERT ELLIOTT Tess (P.O. Box Number is Not Acceptable) 9 BUSST KALEY ST. SRLANDO FL 85 Zip Code 32.806 oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered and when canadalogy DATE
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A CRLANDO, FL. 3 & 806 Suite, Apt. #, etc. 27 City & State Zip Country Zip 28 7. Country Zip 29 9. Name and Address of Current Registered Agent 1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Stoffice or registered agent, or both, in the State of Florida. Such change we agent. I am familiar with, and accept the obligations of, Section 607 0505 SIGNATURE Signature. Typed or primed name of registered agent and title if applicable. OFFICERS AND DIRECTORS TILE AME THE TADDRESS ORLANDO, FL. 3 2866 DELETE AME TILE TILE AME TILE AME TILE TILE AME TILE TILE AME TILE	Country 30 81 Name 82 Street Addin 4 O 83 84 City atutes, the above-named corporas authorized by the corporatio, Florida Statutes (NOTE: Registered Agent signature require	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 1 / 18 / 89 4. FEI Number 5 - 2759 353 Applied For Not Applicable 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing S5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent ROBERT ELLIOTI ress (P.O. Box Number is Not Acceptable) 9. BUEST KALEY ST. SRLANDO FL 85 Zip Code 32.806 oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered 1 / 13/98 red when constating) DATE
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9. Name and Address of Current Registered Agent 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida St office or registered agent, or both, in the State of Florida. Such change wagent, I am familiar with, and accept the obligations of, Section 607.0505 SIGNATURE Robert Elicott President SIGNATURE OFFICERS AND DIRECTORS INTEREST ADDRESS AME ORAS KOVICH YORB WEST KALEY ST. GRLANDO FL. 32866	81 Name 82 Street Addn 4 0 83 84 City atutes, the above-named corporation, Florida Statutes (NOTE: Registered Agent signature require	10. Name and Address of New Registered Agent ROBERT ELLOTT ress (P.O. Box Number is Not Acceptable) 9 B WEST KALEY ST. SRLANDO FL 85 Zip Code 3 3 8 0 C oration submits this statement for the purpose of changing its registered only board of directors. I hereby accept the appointment as registered 11/13/98 11/13/98
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ITY-ST-ZIP 4. I hereby certify that the information supplied with this filing does not quality.	fy for the exemption stated in S	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 officer or director of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, or on an attachment with an address	accurate and that my signature to execute this report as requir	e snall nave the same legal effect as if made under oath; that I am an ired by Chapter 607, Florida Statutes; and that my name appears in
SIGNATURE: Robert E. Ellioth	(1sh 85/16	//

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