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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K97138

(7)

ART STRUCTURES, INC.

Principal Place of Business Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



% JAMES BRADLEY 333 EAST DOUGLAS ROAD OLDSMAR FL 34677-9822		% JAMES BRADLEY 333 EAST DOUGLAS ROAD OLDSMAR FL 34677-9922		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/21/1989	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1460	BELTARES	—	TREES	59-2957043	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22 SU/		27 SUITE	* 9	5. Certificate of Status Desired	Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
23 DUA	IADIN, FL.	28 DUNEDIA	l FL.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24 346	98 25 USA 9, Name and Address of Curren		30 USA	Personal Property Tax due June 30.	Yes No
		t negistered Agent	81 Name	10. Name and Address of New Registered	3 Agent
	ADLEY, JAMES			BRADLEY JAMES	
333 E DOUGLAS RD			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
OLDSMAR FL 34677			B3 14-0	O BELTKES	
ļ			Su	17# # 9	
			184 City	·-	85 Zip Code
44 Purcusat	to the province of Sections 607 050	2 and 607 1609 Elected Statute	the charge served served	UNEDIN FI	34698
office or	registered agent, or both, in the State	of Florida. Such change was a	s, trie above-harned cor uthorized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	or changing its registered opointment as registered
	71 5 70 77		ida Statutes.		_
SIGNATURE	Signification by the state of t	BY JAMES	S. BRADLAS Registered Agent signature requ	y 4-2-9 uired when reinstating) DATE	<u> </u>
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AF	Change Addition
NAME	BRADLEY, JAMES		1.2 NAME		
STREET ADDRESS	2533 DOLLY BAY #202		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	BRADLEY, JUDITH		2.2 NAME		
STREET ADDRESS	2533 DOLLY BAY DR #202		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL		2.4 CITY+ST-ZIP	ı	
TITLE	D	☐ DELETE	3.1 TITLE		Change Addition
NAME	MORABITO, PAIGE N	_	32 NAME		
STREET ADDRESS	214 N FRANKLIN ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	WEST CHESTER PA		3.4. CiTY - ST - ZiP		
TITLE	D	☐ DELETE	4.1 TITLE		Change Addition
NAME	BRADLEY, SHAYNE		4. 2 NAME		
STREET ADDRESS	7509 VANCOEVER MALL DR /	\-5	4.3 STREET ADDRESS		
CITY-ST-ZIP	VANCOEVER WA		4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE		Change Addition
NAME	MORABITO, DONALD V.		5.2 NAME		
STREET ADDRESS	214 N FRANKLIN ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	WEST CHESTER PA		5.4 CITY-ST-ZIP		1
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - 7IP		

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 for on an attachment with an address.

SIGNATURE:

4.2.92