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 # L11901

1. Corporation Name
FINE ACCENTS INC.

Principal Place of Business
7656 BYRON DR.
SUITE #4
RIVIERA BEACH, FL.
33404

Mailing Address
13443 MILES STANDISH PORT
PALM BCH. GARDENS, FL.
33410

3. Date Incorporated or Qualified: 8/28/89
3a. Date of Last Report: 8/29/94

2. Principal Place of Business
21 7656 BYRON DRIVE
Suite, Apt. #, etc.
22 SUITE #4
City & State
23 RIVIERA BCH. FL.
Zip 24 33404 Country 25 PALM BCH.

2a. Mailing Address
26 13443 MILES STANDISH PORT
Suite, Apt. #, etc.
27
City & State
28 PALM BCH. GARDENS, FL.
Zip 29 33410 Country 30 PALM BEACH

4. FEI Number: 65-0176681 — 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. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent
PATRICIA APPLEGATE
13443 MILES STANDISH PORT
PALM BEACH GARDENS, FL.
33410

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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: Patricia Applegate — PATRICIA APPLEGATE — DATE 5/11/96

12. OFFICERS AND DIRECTORS

TITLE	P/S/T	☐ DELETE
NAME	PATRICIA APPLEGATE	
STREET ADDRESS	13443 MILES STANDISH PORT	
CITY-ST-ZIP	PALM BCH. GARDENS, FL. 33410	
TITLE	D	☐ DELETE
NAME	PATRICIA APPLEGATE	
STREET ADDRESS	13443 MILES STANDISH PORT	
CITY-ST-ZIP	PALM BCH. GARDENS, FL. 33410	
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
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	600001828206	
4.3 STREET ADDRESS	-05/20/96--01020--024	
4.4 CITY-ST-ZIP	***233.75	
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		

5-17-96 JP

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: Patricia Applegate — 5/11/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE
PATRICIA APPLEGATE

CR2E034 (12/95)