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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L65006

(3)

ARTS IN FLOWERS, INC.

FILED Feb 06 1998 8:00am Secretary of State



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MATZ, RAYMOND 4054 RIDGEWOOD AVENUE PORT ORANGE FL 32127 11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing list registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing list registered officer 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 submits and accept the obligations of Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered submits as registered submits. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. WARE 4.054 RIDGEWOOD AVE. 1.5 INSET ALORES CITY - ST - 2P TITLE 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 2.8 NAME 4.054 RIDGEWOOD AVE. 1.5 INSET ALORES CITY - ST - 2P TITLE 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 2.1 TITLE 2.2 NAME 3.5 INSET ALORES CITY - ST - 2P TITLE 1.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 2.1 TITLE 4.5 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 3.5 INSET ALORES CITY - ST - 2P TITLE 4.1 TITLE 4.2 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 3.5 INSET ALORES CITY - ST - 2P TITLE	24			30	1 Crostical Fropolity Test Size Size Size Size Size Size Size Size					
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12.	SIGNATURE	Signature, typed or printed name of registered a	igent and title if applicable. {NO	OTE. Registered	Ager	nt signature require	d when reinstating) DATE			
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does not quality for the exemption stated in Section 119.07(3)(t), Florida Statutes, Fluttier Gettily that the Informatic or is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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