FILED

03-01-1999 90212 050 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 82560

 Corporation 	Name						
MARCIA'S INTAGLIO-PLUS STUDIO, INC.				,			
					E CORRORA DE L'ARRE MART AURE DE MARTE	ISO God ou asa on asa on a o	AU CHA CAN
Principal Place	e of Business	Mailing Address			-	iti midit midit minit mi	
1418 SAN ROB		1418 SAN ROBERTO CIRC) F				
FT. MYERS FL 33901 FT. MYERS FL 33902-9996							
US US				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		
			_		06/22/1990		
2. Principal Pl	ace of Business	2a. Mailing Address	014	Ω	4. FEI Number	 	olied For
21			Roberte	o Cir	65-0207776		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Red	
22		27					
City & State	8	City & State	FL		6. Election Campaign Financing	\$5.00 t Added to	· .
23		28 F1. N\y ars	Country	,	Trust Fund Contribution		3 1 663
Zip	Country	¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬ ¬	30 / 9		This corporation owes the current year Personal Property Tax.		□No
24	9. Name and Address of Current	23	30 0 5	7	10. Name and Address of New Register		
	5. Name and Address of Current	registered Agent	81	Name	To realize and a second		
STEV	NART, MARCIA A.M.						
1418 SAN ROBERTO DIRCLE		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		į	
FT. N	MYERS FL 33902		83				
			84	City		85 Zip C	ode
44 Disease	to the previous of Sections 507 0502	and 607 1509 Florida Statu	tos the abov	e-named corn	pration submits this statement for the nurnose	of changing its	registered
l office or re	egistered agent, or both, in the State o	f Florida. Such change was a	authorized by	the corporatio	n's board of directors. I hereby accept the ap	pointment as reg	istered
agent. I ar	m familiar with, and accept the obligati	ons of, Section 607.0505, Flo	orida Statutes	i. '	•		
agent. I au SIGNATURE	m familiar with, and accept the obligati	ons of, Section 607.0505, Fk	orida Statutes				
agent. I au SIGNATURE	m familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	ons of, Section 607.0505, Fix and title if applicable. (NOT	orida Statutes	nt signature required			
agent. I ar SIGNATURE	m familiar with, and accept the obligati	ons of, Section 607.0505, Fix and title if applicable. (NOT	e: Registered Age		1 when reinstating) DATE		
agent. I ai SIGNATURE 12.	m familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	ons of, Section 607,0505, Floor and title if applicable. (NOT DIRECTORS	E: Registered Age		1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I as SIGNATURE 12. TITLE NAME	m familiar with, and accept the obligati Signature, typed or printed name of registered agent OFFICERS AND	ons of, Section 607,0505, Floor and title if applicable. (NOT DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME		1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS	signature, typed or printed name of registered agent OFFICERS AND PTD STEWART, MARCIA A.M.	ons of, Section 607,0505, Floor and title if applicable. (NOT DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME	nt signature required	1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I as SIGNATURE 12. TITLE NAME	signature, typed or printed name of registered agent OFFICERS AND PTD STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE	ons of, Section 607,0505, Floor and title if applicable. (NOT DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signature required	1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	nt signature required	1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D.	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature required	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	T ADDRESS	1 when reinstating) DATE	AND DIRECTO	RS IN 12
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D.	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12 Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12 Addition
agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS T ADDRESS T ADDRESS T ADDRESS T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12 Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Figure 1 applicable. (NOT DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Figure 1 applicable. (NOT DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Figure 1 applicable. (NOT DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Figure 1 applicable. (NOT DIRECTORS DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.3 STREE 4.3 STREE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE DELETE DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE DELETE DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE DELETE DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE DELETE DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE	T ADDRESS ST-ZIP	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change	RS IN 12 Addition Addition Addition
agent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature. typed or printed name of registered agent OFFICERS AND STEWART, MARCIA A.M. 1418 SAN ROBERTO CIRCLE FT. MYERS FL VSD STEWART, ROBERT D. 1418 SAN ROBERTO CIRCLE	ons of, Section 607.0505, Fig. and title if applicable. (NOT D DIRECTORS DELETE DELETE DELETE DELETE	E: Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS ST-ZIP	I when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition Addition

6.4 CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: M