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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1234 WASHINGTON AVE

MIAMI BEACH FL 33139

STE 207



SIGNATURE: SIGNATURE AND THEO OF PHINTED HAME OF SIGNING OFFICER OR DIRECTOR

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 25 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L83806

(4)

Mailing Address PO BOX

MIAMI BEACH FL 33119

WORLD CONGRESS ON ART DECO, INC.

US			US				3. Date Incorporated or Qualified 3a. Date of Last Report			
2. Principal Place of Business			i A. Mail	A Molling Address			06/28/1990 06/27/1996 4. FEI Number Applied For			
	, Principal Flace of Business]			2a, Mailing Address						
Suite, Apt, #, etc			26 Suite	Suite, Apt. #, etc.			00'037000	65-0337065 Not Applicable Not Applic		
22			27				5. Certificate of Status Desired		Required	
City & State			City	City & State			6. Election Campaign Financing	\$5.0	O May Be	
23			28	3			Trust Fund Contribution	Trust Fund Contribution		
Zip		Country	Zip	· ` ——-			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30									
	g, Name ar	nd Address of Cur	rent Registered	Agent			10. Name and Address of New Re	gistered Agent		
KINERK, MICHAEL D 2655 PINE TREE DR. MIAMI BEACH FL 33140						81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83				
				Ī		City		85 Zig	Code	
						<u>i. </u>		FL 📉		
office o agent 1	ir registered agen Larn familiar with,	is of Sections 607.0 it, or both, in the St and accept the ob-	0502 and 607.15 ate of Florida. Si iligations of, Sec	608, Florida Statu uch change was tion 607.0505, F	utes, the above authorized be lorida Statute	ve-named only the corporate.	corporation submits this statement for the poration's board of directors. I hereby acce	ourpose of changing of the appointment a	its registered is registered	
SIGNATURE	E Signature, typed or	printed name of registered	agent and title if appl	cable (NC	OTE Registered A	ont signature re	equired when reinstating)	DATE		
12.			AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	ORS IN 12	
TITLE	PD			DELETE	1,1 TITLE			☐ Change		
NAME	WILHELM, I	DENNIS			1.2 NAME	: 1				
STREET ADDRESS					13 STREE	T ADDRESS				
	MIAMI BEACH FL				2					
TITLE		Un FL		DELETE	1.4 CITY- 2.1 TITLE	S1-ZIP	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
	SD NINEDY M	CHAFL D		Las Delete	2.2 NAME	. 1		L_; counting	, El regulion	
NAMÉ	KINERK, MICHAEL D									
STREET ADDRESS						T ADDRESS				
CHY-S1-70°		CH FL 33140		1 200 222	2. 4 City	-ST-ZIP		TT AC		
TITLE	D	_		DELETE	3.1 TITLE	1		Change	Addition	
MAME	BOWER, M	BOWER, MATILDE								
STREET ADDRESS	TADDRESS 1442 JEFFERSON AVE.			3.3 STREET ADDRESS		T ADDRESS				
CHTY-ST-ZIP	MIAMI BEA	CH FL 33139			3.4. CITY	-ST-ZIP			·	
TITLE	DT		······································	DELETE	4.1 TITLE			[☐ Change	Addition	
NAME	RUSS, DEN	IIS			4.2 NAMI	_E [
STREET ADDRESS						T ADDRESS				
CITY - ST - ZUP	MIAMI BEA				4.4 CITY-	1				
TITLE	D D	UITE		DELETE	5.1 TITLE	91-4H		Change	Addition	
	-	MADIA D			5.2 NAME			,		
NAME	GUTIERREZ, MARIA B SS 344 MERIDIAN AVE, 4C				- 2	- }				
STREET ADDRESS						T ADDRESS				
CHY-ST-ZIP	MIAMI BEA	CH FL			5.4 CITY -					
TITLE	}			☐ DELETE	6.1 T∳TL€	}		Change	Addition	
NAME	1				6.2 NAME					
STREET ADDRESS	is]				63 STREE	T ADDRESS				
CITY-SI-ZiP					6.4 CITY-					
14, 1 do her	rehy certify that th	ne information supp	lied with this fili	ng does not qua	lify for the ex	emption sta	ated in Section 119.07(3)(i), Florida Statute	s. I further certify the	at the	
l am an	officer or directo	this annual report or of the corporation Block 13 if changed	or the receiver	or trustee empo	wered to exe	curate and to cute this re	that my signature shall have the same lega port as required by Chapter 607, Florida s	al effect as it made to Statutes; and that my	inder oath; that / name	