2 nd and File on or before Se FINAL NOTICE: will be dissolved.	pt. 29, 1999 or Limited	i Liability Com	• • •	•		
LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			I BIY	SCORETARY OF STATE OLIVISION OF CORPORATIONS 99 JUL 28 AM 9: 44		
FILING FEE Annual Report \$100.00 + \$88.00 forporation Supplemental Fee + \$400.00 Late Fee \$588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE				5 302 2 -		
	BACALT #	00000722				
JERRY'S ARTARAMA WEST PALM BEACH, LC ATTN: ACCOUNTING DEPT. PO BOX 58638-WPB RALEIGH NC 27658			270 SOU	1a. Principal Place of Business Address 270 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH FL 33441		
Principal Place of Business 2a. Mailing Address			3. Date Organiz	ed or Qualified	3a. State of Formation	
Suite, Apt. #, etc. Suite, Apt. #, etc.			06/01/1 4. FEI Number	.998	FL Applied For	
City & State City & State			65-01	94057	Not Applicable	
Zip Country	Zip	Country	65-01 5. Date of Last F	Report	6. Certificate of Status Desired	
7. Name and Address of Curren	Henistered Agent	 -	8. Name and Addres	e of New Pools	S8 75 Additional Fee Required	
BOCA RATON FL 33441			Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code			
Pursuant to the provisions of Sections 608.416 its registered office or registered agent, or both, in the as registered agent, and accept the obligations.						
SIGNATURE [Registered Agent Accepting Appointment] (NOTE Registered Agent signature required when reinstating)				g) DATE		
		Business Street Ac	ss Street Address City, State and Zip Code		, State and Zip Code	
MGRM JERRY'S ARTARAMA SOUTH 270 SOUTH FEDERAL MGRM GOLDSTEIN, JERRY 7579 IMPERIAL DRIV						
)0002 -08/0	29495818 3/9901034807 188,75 ****188.75	
11. I do hereby certify that the information supplied with indicated on this annual report is true and accurate limited liability company or the receiver or trustee e attachment with an address.	and that my signature shall ha	ave the same legal e	flect as if made under oath	i; that I am a ma	naging member or manager of the	

SKANLINGE STEPHEN STUBBS
SIGNATURE AND THEO OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER

INHSE10 R (6/99)

SIGNATURE:



JERRY'S ARTARAMA

July 12, 1999

Jerry's Artarama Stephen Stubbs Comptroller 5325 Departure Drive Raleigh, NC 27616

Florida Department of State Division of Corporations Corporate Records

Dear Sir or Madam:

Please find enclosed a check # 0115 in the amount of \$188.75 for the annual report and corporation supplemental fee. We have not received any other notice prior to the attached. I spoke to a Mr. Mike Mays and he instructed my office to pay the \$188.75.

I have also confirmed with Mr. Mays our address to ensure the delivery of any information from your office.

Yours truly,

Stephen Stubbs Comptroller

