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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M80001

(4)

CORPORATE ART SERVICES, INC.

Principal Place	of Business							
1340 GENE STRI WINTER PARK F		1340 GENE STREET WINTER PARK FL 327	89-4839					
					3. Date Incorporated or Qualified 04/28/1988		e of Last R <b>8/1996</b>	eport
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			59-2899257	<del></del>		t Applicable
Suite, Apt. #		Suite: Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		Crty & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip 29	30	Country		Yes 🗆	No	. 199.032.
	9. Name and Address of Cu	rrent Registered Agent		81 Name	10. Name and Address of New F	tegistered A	gent	
11. Pursuant to office or reagent. Lan	o the provisions of Sections 607 gistered agent, or both, in the S h familiar with, and accept the c	0502 and 607.1508, Florida State of Florida Such change with the state of Section 607.0508	atutes, the vas author 5, Florida	83  84 City  e above-named corprized by the corporations statutes.	oration submits this statement for the ion's board of directors. I hereby acc	FL purpose of ept the appo	85 Zip ( changing it intment as	s registered
S	gnature, typod or printed name of registers			stered Agent signature requir		DATE		·
12.	T	AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF			<u> </u>
NAME STREET ADDRESS	PST TANENBAUM, MARK H. 1340 GENE STREET WINTER PARK FL	☐ DELETE	<b>∫</b> 1	11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		•	Change	Addition
11/11	37773 947 1 ( 977 1 36	DELETE	2	2.1 TITLE		1	Change	Addition
NAME STREET ADDRESS			2	2 NAME				
Offy-ST-ZIF Title NAME	——————————————————————————————————————	DELETE	3	2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME			Change	Addition
STREET ADDRESS			3	3.3 STREET ADDRESS				
TULE		DELETE		L1 TITLE			Change	Addition

14. If do 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 City-St-zip

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - S1 - 7IP

THILE

CITY-ST-ZIF

ANATURE AND TYPED OR PRINTEGRAMS OF SECURIOR OFFICER OR DIRECTOR

DELETE

DELETE

X 3/24/97 X 407628 8011

Change

Change

Addition

Addition

**FILED** 

Apr 10 1997 8:00am

Secretary of State