PROFIT / CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # M84009 1. Corporation Name

ARTEL SALES COMPANY, INC.

							-	(8	NAKA TAH ANAN A	HOLD HINK BIRK	818); B18); 188)
Principal Place	a of Business	Mai	ling Address								
15685 CARRIED			S CARRIEDALE				1				
FT. MYERS FL 33912 FT. MYERS FL 33912						DO NOT WRITE IN THIS SPACE					
!			-				3. Date Inc.	orporated or Qualifed			
}							06/06/				
		1 30	Moiling Addrogg			_	4. FEI Num		-		pplied For
2. Principal Place of Business 2a. Mailing Address			•		•	65-006			<u> </u>	ot Applicable	
21		26	rivina Ami # at-				05 00	<u> </u>			Additional
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certifcat	e of Status Desired			equired
22		27	City & State_				P. Classica	Campaign Financing			-May Be
City & Stat	· -	\vdash	City of States			1	nd Contribution			to Fees	
23	Country	28	7io 1	Cou	ıntry		+	poration owes the cu	rent year in		
Zip	Country		Zip }		iiii y		1	Property Tax.	Terre year in	Yes	□No
24	25	[29]	and Agent	30	т			nd Address of New	Registered	_=	
	9. Name any Address of Cu	ment Registe	Lea Maur		81	Name	A				,
AVAG	SCHIQUS, AATHUR W.				"	+US		~~V /7	V150 1	<u>-(0)</u>	
	BS CARRIEDALE LANE				82			iumber is Not Accep	table)	- L	
(1268	<u> </u>	mikson	<u>, Y</u>	<u>-v</u>	
j	MYERSARL 33912				83						
1	/				84	City		1 1 C		85 Zip	3912
1	to the provisions of Sections 607					· 1-7	- m	ELS	FL		
SIGNATURE	to the provisions of Sections 607 egistared agent, or both, in the S in familiar with, and accept the other Sprinters, typed or printed name of representations.	Wick	uaur_	(NOTE: Registered		•	when reinstatings		DATE		
12.	OFFICERS	AND DIREC	TORS	13.			ADDITIO	NS/CHANGES TO O	FFICERS A		
TITLE	PS		☐ DELE	TÉ 1.1 TI	TLE					☐ Change	Addition
NAME :	AVISCHIOUS, ELSIE ANN			1.2 N	AME						
STREET ADDRESS	15685 CARRIEDALE LANE			135	TREETA	CORESS					
City-st-zip	FT. MYERS FL			1.4 C	πγ-st-	ZIP					
TITLE			☐ DELE	TE 21 Π	TLE					☐ Change	Addition
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TILE			☐ OELE							☐ Change	Addition
NAME				6.2 N	AME						
STREET ADDRESS				6.3 S	TREET	NDORESS					

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 any attachment with an address, with all other like empowered.

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90135 031 ***150.00