SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **M92264** **(4)**

1. Corporation Name
ART DECO WELCOME CENTER, INC.

Principal Place of Business	Mailing Address
1000 OCEAN DR. MIAMI BEACH FL 33139	P.O. BIN "L" MIAMI BEACH FL 33119

3. Date Incorporated or Qualified: **08/09/1988**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21 **1234 Washington Avenue**
Suite, Apt. #, etc
22 **Suite 207**
City & State
23 **Miami Beach, FL**
Zip 24 **33139** Country 25

2a. Mailing Address
26 **P.O. Box 190180**
Suite, Apt. # etc
27
City & State
28 **Miami Beach, FL**
Zip 29 **33119** Country 30

4. FEI Number **59-1788634** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

KINERK, MICHAEL D
2655 PINE TREE DR.
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	☐ DELETE	11 TITLE	V/D	☒ Change ☐ Addition
NAME	KINERK, MICHAEL D		12 NAME	Kinerk, Michael D.	
STREET ADDRESS	2655 PINE TREE DR.		13 STREET ADDRESS	2655 Pine Tree Drive	
CITY-ST-ZIP	MIAMI BEACH FL 33140		14 CITY-ST-ZIP	Miami Beach, FL 33140	
TITLE	CD	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	GUTIERREZ, MARIA B		22 NAME		
STREET ADDRESS	344 MERIDIAN AVE.		23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139		24 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	RUSS, DENIS		32 NAME		
STREET ADDRESS	1205 DREXEL AVE.		33 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL 33139		34 CITY-ST-ZIP		
TITLE	D	☐ DELETE	41 TITLE	S/D	☒ Change ☐ Addition
NAME	BOWER, MATTI		42 NAME	Bower, Matti	
STREET ADDRESS	1205 DREXEL AVE.		43 STREET ADDRESS	1442 Jefferson Avenue	
CITY-ST-ZIP	MIAMI BEACH FL 33139		44 CITY-ST-ZIP	Miami Beach, FL 33139	
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

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***225.00
7-11-96

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Maria Gutierrez CHAIRMAN, MARIA B. GUTIERREZ 6/20/96 (305) 672-2014
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number