SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
95 AUG -7 AM 10:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N30599 (7)

1. Corporation Name
INTEGRATED ARTS INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
C/O ESTHER R. SCOTT 12198 NW 30 STREET CORAL SPRINGS FL 33065	C/O ESTHER R. SCOTT 12198 NW 30 STREET CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified: 02/09/1989
3a. Date of Last Report: 04/05/1994
4. FEI Number: 65-0131290 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1350 E. Sunrise Blvd.	26
22 Suite, Apt. #, etc. Suite #105	27 Suite, Apt. #, etc.
23 City & State Ft. Lauderdale, FL	28 City & State
24 Zip 33304 25 Country USA	29 Zip 30 Country

9. Name and Address of Current Registered Agent

SCOTT, ESTHER R.
12198 NW 30 STREET
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name: PANZECH, Michael A.
82 Street Address (P.O. Box Number is Not Acceptable): 428 PLAZA REAL Apt. 221
83
84 City: BOCA RATON FL 85 Zip Code: 33432

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: [signature] Michael A. PANZECA D.P. 7/31/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	DP	☒ Change ☐ Addition
NAME	SCOTT, ESTHER R.	12 NAME	PANZECA, Michael A	
STREET ADDRESS	12198 NW 30 STREET	13 STREET ADDRESS	428 PLAZA REAL Apt. 221	
CITY-ST-ZIP	CORAL SPRINGS FL	14 CITY-ST-ZIP	Boca Raton, Fl. 33432	
TITLE	DT	21 TITLE	DV	☒ Change ☐ Addition
NAME	OELLRICH, ERNEST N.	22 NAME	Solomon, Stewart	
STREET ADDRESS	12198 NW 30 STREET	23 STREET ADDRESS	3530 Mystic Pte DR #911	
CITY-ST-ZIP	CORAL SPRINGS FL	24 CITY-ST-ZIP	Aventura, Fl.	
TITLE	DV	31 TITLE	DS	☐ Change ☒ Addition
NAME	SOLOMON, STEWART	32 NAME	DAY LORI F.	
STREET ADDRESS	3530 MYSTIC PTE DR #911	33 STREET ADDRESS	1038 NE 4 AVE	
CITY-ST-ZIP	AVENTURA FL	34 CITY-ST-ZIP	Ft. Lauderdale, FL 33304	
TITLE	DV	41 TITLE		☐ Change ☐ Addition
NAME	PANZECA, MICHAEL	42 NAME		
STREET ADDRESS	977 SPRING CIR, #106	43 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL	44 CITY-ST-ZIP		
TITLE	DS	51 TITLE		☐ Change ☐ Addition
NAME	DIAZ, DIANE	52 NAME		
STREET ADDRESS	2111 N 28TH AVE	53 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL	54 CITY-ST-ZIP		
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	WILKS, ERROK A	62 NAME		
STREET ADDRESS	6339 SW 21ST ST	63 STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR FL	64 CITY-ST-ZIP		

CR2E037 (3/95)

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Michael A. PANZECA 7/31/95 (305) 487-7585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0006000