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Secretary of State

07-29-1999 90004 001 *****8.75
 07-29-1999 90004 002 *****61.25

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AMOUNT DUE ON ANNUAL REPORT: \$8.75 IF USUALLY, MINIMUM AMOUNT DUE TO REGISTER: \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N31483

1. Corporation Name
ARTISTS UNLIMITED, INC.

Principal Place of Business
 223 N. 12TH ST.
 TAMPA FL 33602

Mailing Address
 223 N. 12TH ST.
 TAMPA FL 33602

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suits, Apt. #, etc.	26 Suits, Apt. #, etc.	04/03/1989
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-2954446
24 Country	29 Country	5. Certificate of Status Desired
		8.75 Additional Fee Required
		6. Election Campaign Financing
		Trust Fund Contribution
		5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WHITE, GENIE F. 223 N 12TH STREET 223 N. 12TH ST. TAMPA FL 33602	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 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]* DATE: 7/15/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
GARY, ANITA	223 N 12TH STREET TAMPA FL 33602	DAVID ROOSA	223 N. 12th Street Tampa, FL 33602
DT	BARANOWSKI, JERRY		
223 N 12TH STREET TAMPA FL			
DT	WHITE, GENIE FARRELL		
223 N. 12TH STREET TAMPA FL			
DT	BAUMAN, PAUL		
223 NORTH 12TH STREET TAMPA FL 33602			
DAVID ROOSA			
223 N. 12th St. TAMPA, FL. 33602			

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 7/15/99

CR2E037 (5/99)