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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000006165 (4)

1. Corporation Name

ARTISTS' SPACE, INC.



Principal Place of Business

1612 SW 10TH STREET
FT LAUDERDALE FL 33312

Mailing Address

1612 SW 10TH STREET
FT LAUDERDALE FL 33312

3. Date Incorporated or Qualified
12/19/1994

3a. Date of Last Report
11/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MATTOX, MICHAEL B
1612 SW 10TH STREET
FT LAUD. FL 33312

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100001748011

83

-03/18/96--01133--018

84 City

***\$1.25

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, 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 PD
NAME MATTOX, MICHAEL B
STREET ADDRESS 1612 S.W. 10TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL 33312

1.1 TITLE PD
1.2 NAME MATTOX, MICHAEL B
1.3 STREET ADDRESS 1612 S.W. 10TH STREET
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33312

TITLE VD
NAME OLVERO, RAYMOND
STREET ADDRESS 6847 N.W. 28TH WAY
CITY-ST-ZIP FT. LAUDERDALE FL 33309

2.1 TITLE V.D.
2.2 NAME LEE BENSON
2.3 STREET ADDRESS 3200 NE 29TH STREET
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE SD
NAME SOLER, RAYMOND
STREET ADDRESS 3325 NE 10TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL 33305

3.1 TITLE SD
3.2 NAME SOLER, RAYMOND
3.3 STREET ADDRESS 3325 NE 10TH STREET
3.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33305

TITLE TD
NAME SOLER, ANJAL
STREET ADDRESS 3325 NE 18 ST.
CITY-ST-ZIP FT. LAUDERDALE FL 33305

4.1 TITLE TD
4.2 NAME SOLER, ANJAL
4.3 STREET ADDRESS 3325 NE 18TH ST.
4.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33305

TITLE D
NAME BARON, MARSHA
STREET ADDRESS 6595 RACQUET CLUB DRIVE
CITY-ST-ZIP LAUDERHILL FL 33319

5.1 TITLE D
5.2 NAME BARON, MARSHA
5.3 STREET ADDRESS 6595 RACQUET CLUB DRIVE
5.4 CITY-ST-ZIP LAUDERHILL, FL 33319

TITLE D
NAME MILLS, CHARLES
STREET ADDRESS 4460 POINCIANA PLACE, APT 207
CITY-ST-ZIP FT. LAUDERDALE FL 33324

6.1 TITLE D
6.2 NAME MILLS, CHARLES
6.3 STREET ADDRESS 4460 POINCIANA PLACE, APT. 207
6.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33324

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:

Angel C. Soler, SEC.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-29-96 (MICHAEL MATTOX)
1-954-4757320
PM 3-18-1996

CR2E037 (12/95)