FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

✓ PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

FILED Apr 10, 2001 8:00 am Secretary of State

ANNUAL REPORT 2001 Katherine Harris Secretary of State DIVISION OF CORPORATIONS				03-08-2001 90075 028 ***150.00			
DOCUMENT # P.000 1. Corporation Name Fine art in					****		
11061 S.W. 26 Rt. Miami Ft. 33165 Principal Place of Business Mailing Address				35423			
Fine art in 11061 5.W 2	ist.	ork in			TE IN THIS SPAC	DE	
mami, FL	33165		J. Oate Inc	corporated or Qualifed			
2. Principal Place of Business	2a. Mailing Address		4. FEI Nur	nber 65-103	3767_	Applied For	
Suite, Apt. ii, etc	Suite, Apt. #, etc.		5. Certifca	te of Status Desired	1 1	.75 Additiona	
City & State	City & State		i	Campaign Financing and Contribution		5.00 May Be idded to Fees	
Zip Country 24 25		Country 30	Persona	poration owes the curre Il Property Tax.	Y€	es 🗌 No	
9. Name and Address of Curr	rent Registered Agent	B1 Name	10. Name a	nd Address of New R	egistered Agent		
you walk	goige	82 Street	Address (P.O. Box I	Number is Not Accepta	hini		
11061 S.W.	26 Rt.			TOTAL STATE OF THE SECOND		······································	
mami, F	2. 33165	83					
, ,		84 City			F! 85	Zip Coce	
 Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta 	502 and 607.1508, Florida Statutes	s, the above-named	corporation submits	this statement for the	purpose of chang	ing its registera	
agent. I am familiar with, and accept the obli	gations of, Section 607.0505, Florid	do Statutes.	Gration S board of di	ectors, i nereby accep	t the appointment	as registered	
SIGNATURE X TO THE OF T	gens and like is applicable. INOTE: F	Registered Agent signature n	entured when teinstature)		DATE		
	AND DIRECTORS	13.		S/CHANGES TO OFF		ECTORS IN 12	
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NAME	<i>y</i> /5	1.2 NAME 1.3 STREET ADDRESS	11061	5.W. 24	lat P		
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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 an attachment with an address, with all other like empowered.

SIGNATURE:		Charte	yourse_	
	SICHATURE AND TO	PED OR PRINTED NAME &	SIGNING OFFICER OR DIREC	TOR