FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

DOCUME	96		DIVISION OF CORPORATIONS					
1. Corporation Nam	mo	335	(0)		~ · · · · · · · · · · · · · · · · · · ·			
PHIL ART	T, INC.					I AND LIGHT ARE SHAN RIVER AND A	iller ern eren eren	i Diddi Bibli Bibli Didie idal
Principal Place of Br	lusiness	Mail n	g Address					8/8/ 8/8/ 8/8/ <u>5/8/ 5/8/ 5</u>
C/O SHARON RADCLIFF 13090 NORTH A1A VERO BEACH FL 32963		13	O Sharon Radci 090 North Ata 180 Beach Fl 329					
		·				3. Date Incorporated or Qualified 06/10/1991		f Last Report /19/1995
 Principal Place of 	BUSINESS	2a. Ma 26	ailing Address			4. FEI Number 36-3204612		Applied For
Suite, Apt. #, etc	2.	Su Su	ite, Apt. #, etc.			Certificate of Status Desired		Not Applicable \$8.75 Additional
City & State		27	y & State	·				Fee Required
3		28	y a state			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zır	,	Country		This corporation has liability for	r intangible tax ı	
9.	25 Name and Address of Cu	29 Irrent Registere	d Agent	30		Florida Statutes	s ∖ DMo	
				81	Name	10. Name and Address of New	Hegistered Ag	ent
RADCLIFF,	SHARON			82	Street Ado	ress (P.O. Box Number is Not Accepta	blo	
13090 NOR						Wess (F.O. DOX NO TIDES IS NOT Accepta		
AEMO REVO	CH FL 32963			83				
				84	Crty			85 Zip Code
1. Pursuant to the	provisions of Sections 607.0	0502 and 607 15	08, Florida Statute	l_l s, the above n	amed corpo	ration submits this statement for the ni	FL	ing its registered office
familiar with, and	ent, or both, in the State of accept the obligations of, I	Florida. Such cha Section 607.050!	inge was authoriz∈ 5, Florida Statutes.	d by the corpo	pration's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	pointment as rec	pstered agent. I am
IGNATURE	re typed or printed name of registered							
2.	OFFICERS	agent and the flapolica S AND DIRECTOR	tile (NOT RS	F Pagistured Agent 13.	Signature, require	ort wher renal-tings	DATE	
	PSC		DELETE	1 1 TITLE	<u></u>	ADDITIONS/CHANGES TO OF		RECTORS IN 12 Change Addition
	RADCLIFF, WILLIAM			1.2 NAME				- Libertion
	13090 NORTH A1A			13 STREET	ADDRESS			
	VERO BEACH FL VPT	· · · · · · · · · · · · · · · · · · ·	DELETE	1.4 CITY - ST	-ZIP		· · · · · · · · · · · · · · · · · · ·	
	RADCLIFF, SHARON			2 1 TITLE 22 NAME				Change Addition
	13090 NORTH A1A			23 STREET A	DDRESS			
	VERO BEACH FL			2 4 CITY - ST	· ZIF			
LE ME			DELETE	3 1 TITLE		771		hange Addition
				3 2 NAME				
REE! ACORESS				33 STREET				
Y-\$1- Z .P			DELETE	4.1 TITLE	711			hange [7] Addition
Y-\$1- 7 .P LE	· · · · · · · · · · · · · · · · · · ·		DELETE		. T. P.			hange Addition
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oath; that I am ar	n officer or director of the co	rooration or the	DELETE DELETE DELETE is voluntarily furnis upplemental annua	4.1 TITLE 4.2 NAME 4.3 STREET A 4.4 CITY-ST- 5.7 TITLE 5.2 NAME 5.3 STREET A 5.4 CITY-ST- 6.1 THLE 6.2 NAME 6.3 STREET A 6.4 CITY-ST- 1 red and does 1 report is true	DORESS ZIP DORESS ZIP DORESS Z.P not qualify for	or the exemption stated in Section 119, te and that my signature shall have the	C	hange Addition hange Addition Statutes I further
IY-SI-ZP ILE IMME HEE* ADDRESS IY-SI-ZIP LE ME HEE! ADDRESS Y-SI-ZIP LE ME HEE! ADDRESS	y that the information suppliformation indicated on this a n officer or director of the co 12 or Block 13 if changed,	rporation or the r or on an attachm	DELETE DELETE DELETE is voluntarily furnis upplemental annua	4.1 FILE 42 NAME 4.3 STREFT A 4.4 CHY-ST 5.1 THEF 5.2 NAME 5.3 STREET A 5.4 CHY-ST 6.1 THEE 6.2 NAME 6.3 STREET A 6.4 CHY-ST 10 report is true empowered to ss	DORESS ZIP DORESS ZIP DORESS Z.P not qualify for	or the exemption stated in Section 119. te and that my signature shall have the s report as required by Chapter 607, Flo	C	hange Addition hange Addition Statutes further