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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9300002245 (7)

FUNDORA ART GALLERY CORP.

Principal Place of Business Mailing Address				- I DODINESE ING INION CONTRACTOR SEALIN CONTRA	BBRIL DURIO FIDIO IIDIF OIDID BUIL ICO
1034000 OVERSEAS HIGHWAY KEY LARGO FL 33037 US		103400 OVERSEAS HIGHWA KEY LARGO FL 33037-2834 US			
				3. Date Incorporated or Qualified 01/06/1993	3a. Date of Last Report 04/23/1996
2. Principa Pi	iace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0385885	Not Applicable
Suite Apt	# etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7ip 24	Country 25	Z(p	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
[<u>**</u> 7.]	9. Name and Address of Curre			10. Name and Address of New Re	
FUN	DORA, THOMAS		81 Name	1000	
205 CAMELOT DRIVE TAVERNIER FL 33070			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
IAVE	CHNICH PL 330/U		63		······
			84 City		FL 85 Zip Code
11. Pursuant i office or n agent. Lai	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 607.1508, Florida Statute le of Florida. Such change was a igations of, Section 607.0505, Flo	es, the above-named cor uthorized by the corpora rida Statutes.	poration submits this statement for the pation's board of directors. I hereby acceptation's	urnose of changing its registered
SIGNATURE		A COLO			DATE
12.	Signer will type dies printed nach let registered a OFF ICERS A	ND DIRECTORS	Registered Agent signature requ	ADDITIONS/CHANGES TO OFFIC	
1016	PD	DELETE	1.1 TITLE		Change Addition
NAME	FUNDORA, THOMAS		1.2 NAME		
STREET ADDRESS	250 CAMELOT DRIVE		1.3 STREET ADDRESS		
COY ST 7IP	TAVERNIER FL 33070		1.4 CITY-ST-ZIP		
TILE	VO .	DELETE	2.1 TITLE		Change Addition
NAM ₁	FUNDORA, MANNY		2.2 NAME		
STREET ADDRESS	250 CAMELOT DRIVE		2.3 STREET ADDRESS .	*	
C:TY - ST - ZIP	TAVERNIER FL		2.4 CITY-ST-ZIP		
THLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
C-TY-ST ZIP			3.4. CITY - ST - ZIP		
TITLE®		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CTY-ST-ZIP	,,	T Dri F75	4.4 CITY-ST-ZIP		Character Laders
ויינו		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAMÉ			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
Cly St ZiP		· DELETE	5.4 CITY-ST-ZIP		Change Addition
Taluf			6.1 TITLE		FTI CHANGE FTI MOUNDIN
NAME !			6.2 NAME		
STREET ACORESS			6.3 STREET ADDRESS		

SIGNATURE:

14. I do 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.

FILED

Apr 15 1997 8:00am

Secretary of State