SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Jul 25 1997 8:00am PROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P93000010198 (8) MIAMI BEACH ART DECO PUBLISHING, INC. Principal Place of Business Mailing Address 221 MERIDIAN AVE 221 MERIDIAN AVE APT 410 **APT 410** MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 02/04/1993 04/11/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0391329 Not Applicable 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PESTANA, MIRTA 221 MERIDIAN AVE 82 Street Address (P.O. Box Number is Not Acceptable) **APT 410** MIAMI BEACH FL 33139 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. 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 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (4/97) DELETE Change Addition TITLE 1.1 TITLE PESTANA, MIRTA NAME 1.2 NAME CR2E034 221 MERIDIAN AVE APT 410 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1'TITLE Change Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CFTY - ST - ZIP 2.4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change ___ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP 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 eath; 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

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appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mula Reland MIRTA PESTAMA7-21-97 (305) 5"34-3881