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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000030438 (4)

LAJOS RUTKA - ARTISAN PAINTING, INC.

## FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										
2714 S.W. 5TH ST. 2714 S.W. 5TH ST.							•			
DELRAY BEACH FL 33445 DELRAY BEACH FL 33445						DO NOT WRITE IN T	THIS SPACE			
ŀ						-	3. Date Incorporated or Qualified	1110 017102		
						i	04/26/1993			
2. Principal Place of Business 2a. Mailing Address							4. FEI Number	A	pplied For	
21 5 Am	AS ABOVE	26 50					65-0148297		ot Applicable	
Suite, Apt.	#, etc.	<del>├─</del> ¬	Suite, Apt #, etc.				5. Certificate of Status Desired		Additional equired	
City & Stat	0		City & State			+	6. Election Campaign Financing	<del> </del>	May Be	
23	•	—¬ ′	28				Trust Fund Contribution		May be to Fees	
Zip	Country	Zip		Country	у		8. This corporation owes or has paid th	e current year In	tangible	
24	25 29 30		0	Personal Property Tax due June 30. Yes XNo				XNo		
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			<u> </u>		
	itka, lajos			81	'	Name				
2714 S.W. 5TH ST.				82	1	Street Address	(P.O. Box Number is Not Acceptable)			
DE	LRAY BEACH FL 33445			B3	-	<del></del>				
				84	(	City		FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508,	Florida Statutes	the above	L. e-n	named corpora	tion submits this statement for the purpo	se of changing i	ts registered	
office or r	registered agent, or both, in the Sta	ite of Florida, Such	change was au	thorized by	y th	ne corporation:	s board of directors. I hereby accept the	appointment as	registered	
SIGNATURE	on the man their the total decopy into ob-	iganoris or, coordi	001.0000, 11011	ou oluloio.	٠.					
DIGHATORE	Signature, typed or printed name of registered a		(NOTE I	Regislered Ago	enl s	signature required w	rhen reinstating) Da	ATE.		
12.		ND DIRECTORS	DECESE	13.			ADDITIONS/CHANGES TO OFFICERS			
TITLE	DP		DELETE	1.1 TITLE				☐ Change	Addition	
NAME CTOSST ADDOSSO	RUTKA, LAJOS 2714 S.W. 5TH ST.			1.2 NAME	T 4 N	nnece				
STREET ADDRESS CITY-ST-ZIP	DELRAY BEACH FL 33445			1.3 STREET						
TITLE	DELIVIT DENOTITE COTTO		DELETE	2.1 TITLE	31-2			Change	☐ Addition	
NAME				2.2 NAME						
STREET ADDRESS				2.3 STREET	T ADI	DRESS				
CITY-ST-ZIP				2. 4 CITY-5	ST-2	ZIP	<u></u>			
TITLE DELETE					3.1 TITLE			☐ Change	☐ Addition	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREET						
CITY-ST-ZIP			DELETT	3.4. CITY-5	S1 - 2	ZIP		1 0	Autoration	
TITLE		ı	DELETE	4.1 TITLE				Change	☐ Addition	
NAME PERFET ADDRESS				4.2 NAME		DOLOG				
STREET ADDRESS				4.3 STREET						
CITY-ST-ZIP TITLE			DELETE	4.4 CITY-S 5.1 TITLE	٤-١	ur		Change	☐ Addition	
NAME		•	· <del>-</del>	5.2 NAME						
STREET ADDRESS				5.3 STREET	r adi	DRESS				
CITY-ST-ZIP				5.4 CITY-S						
TITLE			DELETE	6.1 TITLE				Change	☐ Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREET	r ADI	DRESS				
CITY-ST-ZIP				6.4 CfTY - S						
44   hereby c	policing and the information cumplied	with this filing does	s not qualify for t	the evemn	tion	n stated in Sec	tion 119 07(3)(i) Florida Statutes, I furth	or certify that the	information	

iii I nereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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 of on an attachment with an address.