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| PROFIT CORPORATION ANNUAL REP 1997 | ORT | | Secre DIVISION O | B. Mort clary of St F CORPO | ilam ile | 1 | | | | | |
|---|--|---------------------|--|--|--|--|---|--|---|--|---------------------------------------|
| DOCUMENT 1. Corporation Name ARTAD, INC. | # P930000 |) 7 9 | 9090 (5) | | | | - - | fti da nfi ac iil b | | ie ha iah adiii | 68 f9.4 69 2 |
| Principal Place of Busines 11218 TAMIAMI TR N SUITE 233 NAPLES FL 33963 | S | 1121 SUIT | illing Address 16 TAMIAMI TR N TE 233 LES FL 34110-1640 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | |
| | | | | | | | 3. Date Incorporated or 11/10/1993 | Qualified | 3a. Date 04/12 | of Last F /1996 | Report |
| 2. Principal Place of Business | ness | 2a. 26 | Mailing Address | | | | 4, FEI Number 65-0448928 | | | | pplied For of Applicat |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | esired | \$8.75 | | Additional |
| 22 City & State | | 27 | City & State | | | | Election Campaign Fit Trust Fund Contribution | nancing | | \$5.00 | equired May Be to Fees |
| Zip 24 | Country 25 | 29 | Zip | 30 Co | ountry | | 8. This corporation has I Florida Statutes | iability for in | Yes 🔲 | x under s No | |
| 9. Name MIERENDORFF | and Address of Current F | Regist | ered Agent | | 81 | lame | 10. Name and Address (| of New Reg | istered Ag | ent | |
| 11216 TAMIAMI TR N | | | ļ | | | treet Addr | ress (P.O. Box Number is No | Acceptable | o) | | |
| SUITE 204 NAPLES FL 33963 | | | | | 83 | | | | · | | |
| | | | | | " | | | | | | |
| 11. Pursuant to the provis | ions of Sections 607.0502 a | and 60 | 7 1508 Florida Sta | tutes the | | City | poration submits this statemen | of for the mu | FL | | Code ts register |
| SIGNATURE | | | | | above-n red by th atutes. | amed corp e corporat | poration submits this statemention's board of directors. I her | nt for the pu eby accept | rpose of ch the appoin | | |
| SIGNATURE Signature, typed | cions of Sections 607,0502 a gent, or both, in the State of lith, and accopt the obligation or printed name of registered agent a OFFICERS AND C | and title if | Lapplicable. (N | | above-n red by th atutes. | amed corp e corporat | poration submits this statemention's board of directors. I her fred when reinstating) ADDITIONS/CHANGES | | The appoint DATE | hanging interest as | ts registere registere |
| SIGNATURE Signature, typed 12. TITLE STD | or printed name of registered agent a | and title if | Lapplicable. (N | OTE: Reg ster | above-need by the atutes. above-need by the atutes. area Agents Title | amed corp e corporat | ired when reinstating) | | The appoint DATE | hanging introduced the hanging in th | ts registere registere |
| SIGNATURE Fignature, types 12. TITLE STD MANTHEN | or printed name of registered agent a | and title if | Lapplicable. (N | OTE: Rog stor 13 1.1 1.2 | above-ned by the atutes. Tod Agents Title NAME | amed corp e corporat | ired when reinstating) | | The appoint DATE | hanging interest as | ts rogister registere |
| SIGNATURE Fignature, typed 12. TITLE STD NAME MANTHE! STREET ADDRESS 11290 EN | OFFICERS AND C OFFICERS AND C Y, ANNA IERALD BAY CIR STE. L | and title if | Pappicatilo. (N TORS | 01E: Reg stor 13 1.1 1.2 | above-need by the atutes. above-need by the atutes. area Agents Title | amed corperate corporations and corporate corp | ired when reinstating) | | ITPOSE OF CH the appoir DATE ERS AND D | hanging introduced hanging in the hanging in the hange | ts rogisters registers RS IN 12 |
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