## 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.)

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000055966 (3)

VERTICAL ACCENTS, INC.

Pri	ncin	al Place	αŧ	Business
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Mailing Address

2430 SOUTHWEST 56 AVENUE W. HOLLYWOOD FL 33023

P.O. BOX 19656 MIAMI BEACH FL 33118

**FILED** Sep 22 1997 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualified	3a. Date of Last Report		
9 Principal F	Place of Business	2s Mailing Address		07/28/1994 4. FEI Number	08/06/1996		
	Tace or dusiness	26 1498 Jeffurgo	a hace	1	Applied For Not Applicable		
Suite, Apt.	# Atc	Suite, Apt. #, etc.	1 100	65-0521235	C9 75 Additional		
22		27 508-1	<u> </u>	5. Certificate of Status Desired	Fee Required		
City & Stat	te	City & State	10 C)	6. Election Campaign Financing	\$5.00 May Be		
23		28 Miani Beac	Countries	Trust Fund Contribution	Added to Fees		
Zip	Country	2ip 33139	Country U.S.A.	8. This corporation owes or has paid			
24	9. Name and Address of Curren	129 3713 30	1	Personal Property Tax due June 30  10. Name and Address of New Regis			
		it negleteles Agent	81 Name	TO. Hame and Address of their nega	Main Wall		
	SKY, JAY L.		THE				
	SW 56TH AVENUE		82 Street Address (P.O. Box Number is Not Acceptable)				
W. F	OLLYWOOD FL 33023		02				
			83				
			<b>84</b> City		FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.050	22 and 607.1508, Florida Statutes, I	the above-named cor	poration submits this statement for the puration's board of directors. I hereby accept t	be established the state of the second		
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, Florida	a Statutes.	more board or girectors, i hereby accept t	ле арропилент аз герізгегей		
SIGNATURE							
	Signature, typed or printed name of registered age		g stored Agent signature requ		DATE		
12.	<del>,</del>	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER			
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addilion		
NAME	BORSKY, JAY L		1.2 NAME				
STREET ADDRESS	2430 SOUTHWEST 56 AVENUE	<u> </u>	1.3 STREET ADDRESS				
CITY-ST-ZIP	W. HOLLYWOOD FL 33023		1.4 CITY - ST - ZIP				
TITLE		☐ DELETE	2.1 TITLE		Change Addition		
NAME			2.2 NAME				
STREET ADDRESS		<b>!</b>	2.3 STREET ADDRESS				
CITY-ST-ZIP		,	2 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 Title		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS	į		3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY - ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP		·		
TITLE		☐ DELETE	5.1 TITLE		Change L Add tion		
NAME		1	5.2 NAME				
STREET ADDRESS			5.3 STREFT ADDRESS				
CITY-ST-ZIP	<u>                                     </u>		5.4 CITY - ST - ZIP				
TITLE	ĺ	L] DELETE	6.1 TITLE		Change Addition		
NAME	1	[	6.2 NAME				
STREET ADDRESS	}		6.3 STREET ADDRESS				
CITY-ST-ZIP		·- <u></u>	64 CITY-ST-ZIP				
14. I do here	by certify that the information supplies	d with this filing does not qualify for	or the exemption state	ed in Section 119.07(3)(i), Florida Statutes.	I further certify that the		
l am an o	or molested on this annual report or sofficer or director of the corporation of in Riock 12 or Riock 13 if changed as	the receiver or trustee empowerer  to on an abuchment with an address	and accurate and that d to execute this repo	at my signature shall have the same legal e ort as required by Chapter 607, Florida Stat	lutes; and that my name		
appears							
CICNAT	TIBE: SIGN	KHAIKIYATOLI	IPHONIU A	Rosido At 9-17-97	954-417.3/24		