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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000065651 (9)

ARTISTIKA BY GIORGIO MARINONI, INC.

Principal Place of Business 1002 N.E. 118TH ST.

Mailing Address

1002 N.E. 118TH ST.

FILED Feb 02 1998 8:00am Secretary of State



BISCAYNE PARK FL 33161 BISCAYNE PARK FL 33161 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/07/1994 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0538888 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 5. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country ďρ Ζiρ 8. This corporation owes or has paid the current year intangible Yes 25 29 30 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KOPPEN, R. DANIEL 700 N.E. 90TH ST. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33138-3206 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Honda Statutes, the above-harned 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 title if applicable (NOTE: Hegistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition THILE 11707 MARINONI, JORGE NAME 1 2 NAME 1002 N.E. 118TH ST. STREET ADDRESS 1.3 STREET ADDRESS **BISCAYNE PARK FL 33161** CHY-ST-ZIP 1 4 CITY-ST-ZIP DELETE 2.1 1(TLE Change Addition 2.2 NAME STHEET ADDRESS 2.3 STREET ADDRESS CITY-SI-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TOTLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 City-St-ZiP DELETE Change ___ Addition TITLE 41 TITLE 4. Z NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition ime 5.1 HILL NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY-ST-7/P DELETE Change Addition 6.1 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS

4.1 I 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 turther 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 chapted or one mattachment with an address.

SIGNATURE: