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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000071409 (4)

	EL STEIN FINE ARTS, IN	C.			
Principal Place	of Business	Mailing Address			1954 <b>28</b> 564 06114 08004 55041 01041 08140 1001 4001
2240 PARKSIDE STREET 2240 PARKSIDE STR BOCA RATON FL 33486 BOCA RATON FL 33					
				3. Date Incorporated or Qualifier	
2 Principal Pk	ace of Business	20 Mailing Address		09/28/1994	03/23/1995
1	308 OF CHISHIESS	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #	#, etc	Suite, Apt. #, etc		36-2774776	Not Applicable
2		27	<i>.</i> .	5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	
3		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ . t	Country	Zip	Country	8. This corporation has liability for	or intangible tax under s 199,032,
· [	25	29	30	Florida Statutes	es 🗌 No
	9. Name and Address of Cur	rrent Registered Agent	95 810000	10. Name and Address of New	Registered Agent
0.7.00	SPARATION AVATOM		81 Name		
	RPORATION SYSTEM OUTH PINE ISLAND ROAD		82 Street A	ddress (P.O. Box Number is Not Accept	able)
	TION FL 33324		83		
PLANIA	IUN PL 33324		03		
			84 City		85 Zip Code
1. Pursuant to	a the provisions of Sections 607.09	F00 and 607 1508 Florida St	the share earned one		FL
				ooration submits this statement for the poard of directors. I hereby accept the ap	surpose of changing its registered offic prointment as registered agent, I am
	h, and accept the obligations of, S	Section 607.0505, Florida Stat	utes.	· · · · · · · · · · · · · · · · · · ·	Approximate and reflection and and and and and and and and and an
IGNATURL -	Signature: typed or printed name of registered a	some and title if applicable	INOTE: Registered Agent signative re-	sized volume around this A	
	Signature its medicol pronte o namici of registered a OF FICERS /	AND DIRECTORS	(NOTE: Registered Agent signature red		DATE FICERS AND DIRECTORS IN 12
2.					FICERS AND DIRECTORS IN 12
2. ILE	OFFICERS / P Stein, Samuel W	AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
Z. FLE	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS	13. 1.1 TITLE		FICERS AND DIRECTORS IN 12
E.  TLE  SME  REET ADDRESS  TY:S1:ZIP	OFFICERS / P Stein, Samuel W	AND DIRECTORS  DELFTE	13. 1.1 TITLE 12 NAME		FICERS AND DIRECTORS IN 12
ELE  SIME  REEL ADDRESS  TY-S1-ZIP	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 SIREFT ADDRESS		FICERS AND DIRECTORS IN 12
ELE  SIME  REEL ADDRESS  TY-S1-ZIP	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELFTE	13. 1.1 TITLE 1.2 NAME 1.3 STREFT ADDRESS 1.4 CITY-ST-ZIP		FICERS AND DIRECTORS IN 12 Change Addition
ELE SME REET ADDRESS TY-ST-ZIP TLE	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELFTE	13.  1.1 TITLE 12 NAME 13 STREFT ADDRESS 1.4 City-St-Zip 2.1 Title		FICERS AND DIRECTORS IN 12 Change Addition
Z.  THE  MME  REFLADDRESS TY: S1-7IP  THE  MME  REFLADDRESS TY: S1-7IP	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREFT ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME		FICERS AND DIRECTORS IN 12 Change Addition
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Z. TLE KAME IREET ADDRESS TY-ST-ZIP TLE KAME IREET ADDRESS TY-ST-ZIP TLE KELLADURESS TY-ST-ZIP TLE KME	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELETE  DELETE	13.  1.1 TITLE 12 NAME 13 STREFT ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP		FICERS AND DIRECTORS IN 12 Change Addition Change Addition
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Z.  PILE  AME  TREEL ADDRESS  ITY-ST-ZIP  TLE  AME  TABLE LADDRESS  ITY-ST-ZIP  TLE  AME  THEEL ADDRESS  ITY-ST-ZIP  TLE  TLE  TLE  TLE  TLE  TLE  TLE  TL	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELETE  DELETE	13.  1. 1 TITLE  1. 2 NAME  1.3 SIREFT ADDRESS  1.4 CITY - ST - ZIP  2.1 TITLE  2.2 NAME  2.3 SIREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 SIREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE		FICERS AND DIRECTORS IN 12  Change Addition  Change Addition
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2.  PILE  PAME  TREET ADDRESS  PLY ST- ZIP  PLE  AME  TREET ADDRESS  PLY ST- ZIP  TREET ADDRESS  PREET ADDRESS  PREET ADDRESS	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIRECTORS  DELETE  DELETE	13.  1. 1 TITLE 12 NAME 13 STREFT ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS		FICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition
2.  PILE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  THEET ADDRESS  ITY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TLE  AME  TREET ADDRESS  TY-ST-ZIP  TREET ADDRESS  TY-ST-ZIP	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIFFECT ORS  DELETE  DELETE  DELETE	13.  1. 1 TITLE  1. NAME  1.3 SIREFT ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 SIREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 SIREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 SIREET ADDRESS  4.4 CITY-ST-ZIP		FICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition
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2.  PILE  AME  TREET ADDRESS  ITY-ST-ZIP  TLE  AME  THEET ADDRESS  TY-ST-ZIP  TLE  AME	OFFICERS / P STEIN, SAMUEL W 2240 PARKSIDE ST	AND DIFFECT ORS  DELETE  DELETE  DELETE	13.  1. 1 TITLE  1. NAME  1. 3 STREFT ADDRESS  1. 4 CITY - ST - ZIP  2. 1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY - ST - ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY - ST - ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY - ST - ZIP  5. 1 TITLE  5.2 NAME  5.3 STREET ADDRESS  4.4 CITY - ST - ZIP  6.1 TITLE  6.2 NAME		FICERS AND DIRECTORS IN 12  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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SIGNATURE:

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-96 (407)394-6005
Date Date