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FILED
Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000000433 (9)

1. Corporation Name

THE ART OF THE PARTY, INC.



Principal Place of Business

4010 EAST HILLSBOROUGH
TAMPA FL 33610
US

Mailing Address

4010 E. HILLSBOROUGH
TAMPA FL 33610
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1995

2. Principal Place of Business

21 13725 N. 12th St.

Suite, Apt. #, etc.

22

City & State

23 Tampa, FL

Zip

24 33613

Country

2a. Mailing Address

26 13725 N. 12th St.

Suite, Apt. #, etc.

27

City & State

28 Tampa, FL

Zip

29 33613

Country

30

4. FEI Number

59-3291567

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

g. Name and Address of Current Registered Agent

SANTACREU, JEAN-MICHEL
14100 N. 46 ST., STE. 204G
TAMPA FL 33613

10. Name and Address of New Registered Agent

81 Name Santacreu, Jean-Michel

82 Street Address (P.O. Box Number is Not Acceptable)

2933 W. Knights Ave

83

84 City

Tampa

FL

85 Zip Code

33611

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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



J.M. Santacreu, Director

01/16/98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SANTACREU, JEAN-MICHEL
STREET ADDRESS 14100 N. 46 ST., STE. 204G
CITY-ST-ZIP TAMPA FL 33613

TITLE VP ☐ DELETE

NAME SANTACREU, NANCY
STREET ADDRESS 14100 N 46 ST 204G
CITY-ST-ZIP TAMPA FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☒ Change ☐ Addition

1.2 NAME Santacreu, Jean-michel
1.3 STREET ADDRESS 2933 W. Knights Ave
1.4 CITY-ST-ZIP Tampa, FL 33611

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME Santacreu, Nancy
2.3 STREET ADDRESS 2933 W. Knights Ave
2.4 CITY-ST-ZIP Tampa, FL 33611

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 further 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 changed, or in an attachment with an address.

SIGNATURE:



J.M. Santacreu 01/16/98 813-9107474

CR2E034 (10/97)