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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500006513

ART'S CARTS, INC.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90014 015 ***150.00



Mailing Address Principal Place of Business 509 US HWY 27, NORTH. 509 US HWY 27. NORTH DUNDEE FL 33838 DUNDEE FL 33838 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/23/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3303293 Not Applicable 26 Suite, Apt, #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes the current year Intangible **□**Kiα 30 Personal Property Tax. ☐ Yes 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOBSON, ARTHUR L Street Address (P.O. Box Number is Not Acceptable) 509 US HWY 27, NORTH **DUNDEE FL 33838** 84 85 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, 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE ☐ Change TITLE 1.1 TITLE HOBSON, ARTHUR L NAME 1.2 NAME 509 US HWY 27, NORTH 1.3 STREET ADDRESS STREET ADDRESS **DUNDEE FL 33838** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition 2.1 TITLE TITLE HOBSON, TERRI M NAME 2.2 NAME 509 US HWY 27 N 2.3 STREET ADDRESS STREET ADDRESS DUNDEE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 3.1 TITLE 3.2 NAME NAME; 10° HWY-12', NO.13 3.3 STREET ADDRESS STREET ADDRESS DEE FL 1883A CITY-ST-ZIP 3.4. CITY-ST-ZiP DELETE 41 DILE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition ☐ Change 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE ☐ Addition TITLE 机线 医肾髓 经经济 6.2 NAME NAME . **到4.2平 生 2%**定 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-78P

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 suppliemental 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 of 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 on an attachment with an address with all other like empowered.

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