FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

12801 W. SUNRISE BLVD.

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000014250

1. Corporation Name

Principal Place of Business

12801 W. SUNRISE BLVD.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

ART TREASURES, INC.

Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Countr	02/20/1995 2a. Mailing Address 4. FEI Number Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Zip Country Zip Not Apt. #, etc. Status Desired Status Desi	26 65-0559725 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Zip Country B. This corporation owes the current year Intangiby6 Personal Property Tax. Yes Name Address of New Registered Agent EEVI, YARON (RON)	Suite Ant # etc\$8.75 Additional
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	Suite Ant # etc\$8.75 Additional
City & State 28 City & State 28 City & State 28 City & State 28 Country Solution Solution Added to Fe Personal Property Tax. Personal Property Tax. Solution Name and Address of New Registered Agent Solution S	5. Certificate of Status Desired
Zip Country Zip Country 8. This corporation owes the current year Intangipte Personal Property Tax. 9. Name and Address of Current Registered Agent LEVI, YARON (RON) 8. This corporation owes the current year Intangipte Personal Property Tax. 10. Name and Address of New Registered Agent 81 Name	City & State 6. Election Campaign Financing \$5.00 May Be
24 25 29 30 Personal Property Tax. Yes Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent EEVI, YARON (RON) 81 Name 82 Signature (RON)	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEVI, YARON (RON)	
LEVI, YARON (RON)	
IZOVI VV. QUINDIQE DLVD.	LVD. Street Address (P.O. Box Number is Not Acceptable).
STORE #707	
SUNRISE FL 33323	63
84 City 85 Zip Code	84 City 85 Zip Code
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 register.	FL
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 registe agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE (NOTE: Registered Agent signature) DATE	accept the obligations of, Section 607.0505, Florida Statutes.
Signature, typed or printed name or registered agent and title if applicable.	name of registered agent and their applicable. (1001c. registered
ADDITIONO/OHANOCO TO OFFICEDS AND DIDECTORS	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I	Detecte Time
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TITLE	DELETE 3.1 TITLE Change Addition 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP Change Addition Change Addition

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 on an attachment with an address, with all other like empowered

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

☐ Change

FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90228 017 ***150.00

Addition