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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000026186 (3)

SOUTH BEACH TATTOO COMPANY

FILED Jan 21 1998 8:00am Secretary of State



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Principal Plac	ce of Business	Mailing Address					11		1414 MM111 MM11M 1	EECO BICOL 13261 .	IBINT CIN IBOL	
861 WASHINI MIAMI BEACI US		515 W 28 ST MIAMI BEACH FL 331 US	MIAMI BEACH FL 33140					DO NOT W	RITE IN THIS	SPACE		
00		00				F	3. Date	Incorporated or Quali				\neg
ļ						ļ	04	/03/1995				
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address					Number		1 1	Applied For	┪
21	Same	26 5	26 Dame				6	5-0569022			lot Applicabl	e
Suite, Apt.		Suite, Apt. #, etc.						ificate of Status Desired	. 🗆		Additional Required	
City & Stat	A	City & State	City & State									-
23	~	— ·	28			i	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	Country	Zip	i record to the control of the contr									\dashv
24	25	29	<u>├</u> ── ` · · · ── · · ·				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. X Yes No					
	g. Name and Address of Cu						10. Name and Address of New Registered Agent					
CA	MERON, KEN		***************************************	81	Name		<u> </u>	7 7				\neg
1	5 W 28 ST					Street Address (P.O. Box Number is Not Acceptable)						\dashv
MI	AMI BCH. FL 33140		82			71001000						_
				83								
				84	City				F	<u> </u>	Code	
11. Pursuant office or r	to the provisions of Sections 607 registered agent, or both, in the S im familiar/with, and accept the c	.0502 and 607.1508, Florida Sta State of Florida. Such change with Obligations of Section 607.0505	atutes, the ab as authorized Florida Stati	ove d by	named the corp	corpora poration	ation sub 's board	mits this statement for of directors, I hereby a	the purpose ccept the ac	of changing pointment a	its registered s registered	j
SIGNATURE	and accept the	iongations of, decitor our codo	;	5103	•				1	13/98		
3,3,1,1,1,1	Signature, typed or printed name of registere		NOTE: Registered	Agei	nt signature	required v	vhen reinstat	ting)	DATE	1007,10		f
12.		AND DIRECTORS	13.					TIONS/CHANGES TO C				_ {\frac{5}{2}}
TITLE	P ANTERON WEN	☐ DELETE	1.1 TIT			$ \mathcal{M} $	Shelle	Cameron		Change	Addition) ş
NAME	CAMERON, KEN		1.2 NA			AA		380-Street	2010			3
STREET ADORESS	515 W 28 ST		1.3 STI	REET .	ADDRESS	215	ع من ر			ni o		ì
CITY-ST-ZIP	MIAMI BEACH FL	1 DELETE	1,4 CIT		r-ZIP	100	ram	, Beach ?	71 OC	NAO.	[A J 201	⊣ }
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NAME			2,2 NA		·							
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STREET ADDRESS			3,3 STREET /									
CITY-ST-ZIP TITLE				3.4. CITY - ST-ZIP 4.1 TITLE						Change	Addition	
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NAME					*DDDCCC			•				
STREET ADDRESS					ADDRESS							
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TITLE										Origingt		Ϊ.
NAME			5.2 NA									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP		☐ DELETE	5.4 CIT		-ZIP					Change	Addition	╣.
TITLE		T DETEIL	6.1 TIT							ட பனரி	L Addition	'
NAME			6.2 NA									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP			6.4 CIT	Y-ST	- ZIP							ı

nation supplied with this hing does not quality for the exemption is select it section 119.07(3)(i), Florida Statutes. I littleff cettly into the information of the receiver 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 bration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in