FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT # P95000071337 (6)

DOWNTOWN ART & FRAME, INC.

| Principal Place of Business | | Mailing Address | | | 1005/400 1540 6050 01511 04151 04111 405/11 | 1416 1444 1644 1644 1664 1661 1646 1846 |
|---|---|---|---------------------------|---------------------|--|---|
| 106 WEST WALNUT STREET LAKELAND FL 33801 | | 106 WEST WALNUT STREET LAKELAND FL 33801 | | | | |
| | | | | | 09/12/1995 | Date of Last Report |
| 2. Principal Pa | ace of Business | 2a. Mailing Address | | | 4. FET Number | Applied For |
| 21 | | 26 | | | 59-3335613 | Not Applicable |
| Suite, Apt. : | #, etc. | Suite, Apt. #. etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | Oty & State | | , | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip 24 | Country 25 | Zip 29 | Country 30 | i | 8. This corporation has liability for intan Florida Stalutes ☑ Yes ☐ | |
| | g. Name and Address of Curre | ent Registered Agent | | т | 10. Name and Address of New Regis | stered Agent |
| | | | 81 | Name | | |
| Werk, dane r 106 West Walnut Street | | | 82 | Street Ad | dress (P.O. Box Number is Not Acceptable) | |
| | ID FL 33801 | | 83 | | | |
| | | | 84 | City | | FL 85 Zip Code |
| 11. Pursuant t | o the provisions of Sections 607.056 | 02 and 607,1508, Florida Sta | tutes, the above | L named corp | oration submits this statement for the purpose | e of changing its registered office. |
| or register familiar wi | ed agent, or both, in the State of Flo th, and accept the obligations of, Se | orida. Such change was autho otion 607.0505, Florida Statu | orized by the corp tes | oration's be | hard of areators. Thereby accept the appointing | nent as registered agerit. Fam |
| SIGNATURE . | Signature, typed or printed havie of rejistered age | ent and title. Fainful delile: | (NOTE Boy denic Age | nd Sank of the beat | are that enthings state of | €i¥1F |
| 12. | ······· | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICER | |
| TETLE | D | DELETE | 1 1016 | | | Change Addition |
| NAME | WERK, DANE R | | 1.2 NAME | | | |
| STREET ADDRESS | 6710 POLEY CREEK DRIVE | WEST | 1.3 STREE | I ADDRESS | | |
| CITY-S*-ZIP | LAKELAND FL 33811 | | 1.4 C-1Y - | ST - ZIP | | |
| TITLE | D | DELETE | 2 1 T TEF | | | Crange Addition |
| NAME | WERK, DENISE C | MEAT | 2.2 NAME | | | |
| STREET ADDRESS | 6710 POLEY CREEK DRIVE | WEST | | I ADDRESS | | |
| CITY - ST - ZIP | LAKELAND FL 33811 | ☐ DELETE | 24 CITY - | \$1-7P | | Change Addition |
| TITLE | | L.J Dixere | 3 1016 | | | ☐ Guande ☐ veguent |
| NAME CINCET ADORESE | | | 3.2 NAME | .T.Abouts: | | |
| STREET ADDRESS | | | 3.3 SIME | T ADDRESS | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 4 1 filt | | | Change Addition |
| NAME | | | 4.2 NAME | | | |
| STREET ADDRESS | | | | 1 ADDRESS | | |
| CITY-ST-ZIP | | | 4 4 CITY | | | |
| TITLE | | ☐ DELE1E | 5 1 Till.E | | | Change Addition |
| NAME | | _ | 5.2 NAME | | | |
| STREET ADDRESS | | | | L ADDRESS | | |
| CITY-S1-ZIP | | | 5.4 CITY - | | | |
| TrTLE | | DELETE | 6 17111.6 | | | Change Addition |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | | | 6.3 STHEE | LADDEES's | | |
| CITY-ST-ZIP | | | 6.4 CITY - | 1 | | |

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 686-4944