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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000074274 (8)

OFS ART, INC.

Q O A	111 1140.											
Principal Plac	e of Business	Mailing Address					I JOOHIDO KADARKA AHAL AHAL BUULA				VIO 1001	
708 FIRST COURT 708 FIRST COURT												
PALM HARBOR FL 34684 PALM HARBOR FL 34684			4				DO 1107 11/DI	FF 11 TO 10				
							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
						ļ	09/26/1995	•				
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		Т-	Apr	lied For	
26						İ	59-3337005		<u> </u>	+	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							5. Certificate of Status Desired		\$8.7	75 A	dditional	
27							b. Certificate of Status Desired		Fe	e Rec	uired	
City & Stat	City & State	. State				6. Election Campaign Financing	_			vlay Be		
23	[28]			Country			Trust Fund Contribution				Fees	
Zip 24	F-1 ' F1' F1			• This corporation of				ves or has paid the current year Intangible				
24	25 29 30 30 9, Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent						INO		
90	HLORHOLTZ, STANLEY S			81	Name		10. transcalla reasona at the transcalla	1081010101	Botte			
708 FIRST COURT												
PALM HARBOR FL 34684					Street	t Addres	ss (P.O. Box Number is Not Accepta	able)				
FALM MANDON I L 04004				83	-			****				
									Y			
				84	City			FL	85	Zip C	ode	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the a	bove	-named	d corpora	ation submits this statement for the	purpose of	hangi	ng 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.												
	with the control of t	iona di, ocomoni der .dodo, i i	ionaa bia	10100	•							
SIGNATURE	Signature, typed or printed name of registered agont	and title if applicable (NO	TE: Registere	d Age	nt signatur	re required	when reinstating)	DATE				
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFF					
TITLE	CPD	L_) DELETE	1.1 3	1LE		İ		į	Cha	nge	Addition	
NAME	SCHLORHOLTZ, STANLEY S		1.2 N	AME								
STREET ADDRESS	708 FIRST COURT		1.3 S	TREET	ADDRESS	1						
CITY-ST-ZIP	PALM HARBOR FL	T DELEVE		TY-S	T-ZIP				100		14400	
TITLE	SD SOULOBUOLTZ IOANNI C	L DELETE	21 Ti					L	Cha	nge	☐ Addition	
NAME OTOFFT ADODESS	SCHLORHOLTZ, JOANN C. 708 FIRST CT		22 N			ł						
STREET ADDRESS	PALM HARBOR FL		2.3 STREET									
CITY-ST-ZIP TITLE				2. 4 CITY-ST-ZIP 3.1 TITLE		╅			Chai		Addition	
NAME	RAWLINGS, THOMAS R.	Q	3.2 NAM					•				
STREET ADDRESS	528 E TARDEN AVE TAR.P.	est.	- 8		ADDRESS	ì						
CITY-ST-ZIP	TARPON SPRGS FL	AV		(TY-5								
TITLE	D DELETE			4.1 TITLE					Cha	nge	Addition	
NAME	MORRIS, BUD M.	· · · · · · · · · · · · · · · · · · ·		4. 2 NAME				_				
STREET ADDRESS	2301 PINNACLE CIR N		4.3 S	TREET	address							
CITY-ST-ZIP	PALM HARBOR FL			TY-S								
TITLE		☐ DEL e te	, 5.1 TI	TLE					Chai	nge	Addition	
NAME			5.2 N	AME								
STREET ADDRESS			5.3 S	REET	ADDRESS							
CITY-ST-ZIP				TY - S	r-ZIP	<u> </u>						
TITLE		☐ DELETE	6.1 TI					[Char	nge	Addition	
NAME	•		6.2 N									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP	partify that the information consisted with	this films does not suctiful		TY-S		nd in Co	ection 110 07/3Vi) Elevide Statutes	Liturther ac-	du the	tho:	dometics	
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 supplied 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 any address.												
	SIGNATURE: Stanly de della 165 4/21/98 7/3-789-2628											