


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

AM

FILED

Jul 31 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000081064 (4)
1. Corporation Name

GALLERY ONE CLASSIC DECO ART CORPORATION CORP.

Principal Place of Business 2900 W. SAMPLE ROAD POMPANO BEACH FL 33073	Mailing Address SAME
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Amended

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/16/1995		3a. Date of Last Report	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0627203		Applied For		Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>		8.75 Additional Fee Required			
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		5.00 May Be Added to Fees			
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent BERKOWITZ, GEORGE 1327 RODMAN STREET HOLLYWOOD FL 33019				10. Name and Address of New Registered Agent			
81 Name				STEVEN SAGI			
82 Street Address (P.O. Box Number is Not Acceptable)				1301 NE 7 ST			
83 #				411			
84 City				HALLANDALE FL			
				85 Zip Code 33009			

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 *Steven Sagi* 7/24/97

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE <input type="checkbox"/> DELETE				1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME STEVEN SAGI				1.2 NAME			
STREET ADDRESS 2900 W SAMPLE ROAD				1.3 STREET ADDRESS			
CITY-ST-ZIP POMPANO BEACH FL 33073				1.4 CITY-ST-ZIP			
TITLE <input type="checkbox"/> DELETE				2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME MIKLOS SAGI				2.2 NAME			
STREET ADDRESS 2900 W SAMPLE ROAD				2.3 STREET ADDRESS			
CITY-ST-ZIP POMPANO BEACH FL 33073				2.4 CITY-ST-ZIP			
TITLE <input checked="" type="checkbox"/> DELETE				3.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME 6 SECRETARY / TREASURER				3.2 NAME			
STREET ADDRESS GIZELLA BERKOWITZ				3.3 STREET ADDRESS			
CITY-ST-ZIP 2900 W SAMPLE ROAD				3.4 CITY-ST-ZIP			
TITLE <input checked="" type="checkbox"/> DELETE				4.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME CHAIRMAN, CEO				4.2 NAME			
STREET ADDRESS GEORGE BERKOWITZ				4.3 STREET ADDRESS			
CITY-ST-ZIP 2900 W SAMPLE ROAD				4.4 CITY-ST-ZIP			
TITLE <input type="checkbox"/> DELETE				5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE <input type="checkbox"/> DELETE				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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.

SIGNATURE: *Steven Sagi* STEVEN SAGI 7-12-97 (954) 984-0407

CR2E034 (9/96)