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 #

1. Corporation Name

P96000017149 (1)

LADEN B. FURIS - PROKUNENT

ANIMAL ART, INC.

FILED Feb 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 14014 MIDDLETON WAY 14014 MIDDLETON WAY	
4404 MIDDLETON WAY	
14014 MIDDLETON WAY TAMPA FL 33624 TAMPA FL 33624	DO MOT WOLTE IN THIS COLOR
<u> </u>	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualified
2. Principal Place of Business , ACE DD 2a. Mailing Address 4.	02/23/1996 FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address 4. 21 TAMPA FL 33624 26	59-3366227 Not Applicable
Suite Ant # etc Suite Ant # etc	S8.75 Additional
22 27	Certificate of Status Desired Fee Required
	Election Campaign Financing \$5.00 May Be
23	Trust Fund Contribution Added to Fees
`	This corporation owes or has paid the current year Intangible
	Personal Property Tax due June 30. Yes No
	Name and Address of New Registered Agent
BRUZEL, HERBERT A 81 Name L GRE	EN B. EVANS
14014 MIDDLETON WAY 82 Street Address (P	P.O. Box Number is Not Acceptable)
TAMPA FL 33824 140/4 83	MIDDLETON WHY
$ ^{\infty} $ TAMP	PAFL
84 City	PL 85 Zip Code 7 367 4
7 / M/	
11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's bagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	board of directors. I hereby accept the appointment as registered
	11 m. 12 2/14/08
SIGNATURE Signature typed or printed name of registered agent and time if applicable (NOTE: Registered Agent signature required when	en reiostatino) DATE
	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D SPELETE 1.5 TITLE	Change Addition
NAME BRUZEL, HERBERT A 12 NAME	
STREET ADDRESS 14014 MIDDLETON WAY 1.3 STREET ADDRESS	
CITY-ST-ZIP TAMPA FL 33624 1.4 CITY-ST-ZIP	
TIPLE P- DESAGN B. EVANS DELETE 2.1 TIPLE	Change Addition
2.2 NAME	
STREET ADDRESS 14014 MID DLETON WAY 2.3 STREET ADDRESS	
CITY-ST-ZIP TIAMPA, FL 33624 2.4CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	☐ Change ☐ Addilion
NAME 3.2 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	
TITLE DELETE 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADORESS 4.3 STREET ADORESS	·
CITY-ST-ZIP 4.4 CITY-ST-ZIP	Change Addition
TITLE DELETE 5.1 TITLE	C. Change C. Addition
NAME 5.2 NAME	•
STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP	Change Addition
	- Onengo - Poutton
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY 67, 700	
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.1 Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section	ion 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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by	iali nava the same legal effect as it mage under catri; that I am an - i
Block 12 or Block 13 if changed, or on an attachment with an address.	by chapter our promote detector, and that my mano appears in