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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

STREET ADDRESS

COTY - ST - ZIP

DOCUMENT # P9600026501

ART'S BOOK WORLD, INC. Mailing Address Principal Place of Business 2718-49TH STREET NO.6822-22 X/D A V.(V ART'S BOOK WORLD, INC. SUITE 245- 175 6822 22nd Ave. No. Ste 175 ST. PETERSBURG FL 33710 St. Petersburg, FL 33710 3. Date Incorporated or Qualified 3a. Date of Last Report hen Address 03/21/1996 2a. Mailing Address 4. FEI Number Applied For 9-3368 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 9. Name and Address of Current Registered 10. Name and Address of New Registered Agent 81 Name FINANCIAL FOUNDATIONS, INC. 1301 SEMINOLE BLVD. 62 Street Address (P.O. Box Number is Not Acceptable) SUITE 155 83 LARGO FL 34640 84 City Zip Code 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 Sign of the Typical or printed name of registered agent and tirk if applicable (NOTE: Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. Change Addition THE TRES. DELETE 11 TITLE SANDMEYER, VIRGINIA V NAME CED 1.2 NAME 3713 49TH STREET NO., SUITE 245 STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33710 1.4 CITY - ST - ZIP CITY-ST-7/P Change Addition TITLE V. PRES 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-SL 70 Change DELETE Addition mu 3.1 TITLE 3.2 NAME NAM: 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY-ST-ZIP CRY-ST ZIP DELETE Change Addition 4.1 TITLE THLE 4. 2 NAME NAMI 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-7P DELETE Change Addition 5.1 TOTLE TITLE 5.2 NAME NAVE 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP Addition DELETE 61 TITLE Change TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 path; 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, portion Statutes; and that my paper

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

SIGNATURE REQUIRED SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03772

FILED

Apr 11 1997 8:00am

Secretary of State