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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE-

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000026656 (4)

ART-MAR ENTERPRISES INC.

FILED Mar 03 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailı	Mailing Address				T SOURCE AND COLOR DELICE AREAL ROSIN BODING BRING AND A BANKE BANKE BANKE BANKE BANK COLOR				
19674 SAWGRASS DRIVE. #6102			19674 SAWGRASS DRIVE. #6102								
BOCA RATON	FL 33434	BOG	A RATON FL 33434-5	3340							
							3. Date Incorporated or Qualified 03/20/1996		te of Last	•	7
· · · · · ·	lace of Business	2a. M	Mailing Address	 			4. FEI Number	14.00		Applied For	٦
21			26				//-3026940 Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State				6. Election Campaign Financing \$5.00 May Be				
23			28				Trust Fund Contribution			to Fees	╛
Ζιρ					8. This corporation has liability for intangent				· · · · · · · · · · · · · · · · · · ·		
24	25 29 30 9. Name and Address of Current Registered Agent			30	Florida Statutes Yes No Has Bank 10						4
CU		or corrent Register	ea Agent		81	Name	10. Name and Address of New Re	Jistered A	gent	ONLY	4
	ARWAT, ARTHUR C	#0100				INDIFF					
19674 SAWGRASS DRIVE, #6102 BOCA RATON FL 33434			82			Street Add	eet Address (P.O. Box Number is Not Acceptable)				
	OX 1811 O11 1 E 00101				63		, , , , , , , , , , , , , , , , , , ,		•	 	-
					64	City		FL	85 Zip	Code	1
11. Pursuant	to the provisions of Section	ns 6 07.0502 and 6 07	.1508, Florida Statu	tes the al	DOVE	e-named cor	poration submits this statement for the p	urpose of	changing	its registered	+
agent. La	registered agent, or both ini familiar with, and accer	the State of Torida the obligators of, S	Such change was section 607,0505, FI	authorize orid a Stat	a by lutes	the corpora 5.	poration submits this statement for the p tion's board of directors. I hereby accep	t the appo	ointment a	s registered	
SIGNATURE	ACC Stallut (Sign of the type of on punited name of	Denam					ired when reinstating)	DATE			
12.	OFF	ICERS AND DIRECTO		13.			ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	վց
TITLE	F/D				1.1 TITLE				Change		٦ <u>٥</u>
NAME	CHARWAT, ARTHUR			1.2 N/	AME						1
STREET ADDRESS	19674 SAWGRASS [1.3 SI	REET	ADDRESS					}
CITY-ST-ZIP	BOCA RATON FL 33	434		1.4 CI	TY-5	T-ZIP					3
TITLE	510		☐ DELETE	DELETE 2.1 TITL			<i>₽</i>		Change	Addition	٦
NAM€	MARILYN CH	ARWAT		2.2 N/	AME						1
STREET ADDRESS	19674 SAWER BOCA RATON F	ASSUR #61	02	2.3 \$1	REET	ADDRESS					
CITY - S1 - ZIF	BOCA KATON F	1. 33434	T DELETE			ST-ZIP					↲
TITLE			DELETE	3.1 TI					Change	Addition	
NAME OTOGET ADDOCUS				3.2 N/							
STREET ADDRESS						ADDRESS					
CITY - ST - ZIP TITLE			DELETE	4.1 T/	•	T-ZIP			Change	Addition	4
NAME				4.2 N					Unange	AUGINORI	
STREET ADDRESS						ADDRESS					
CITY - ST - ZIP				4.4 CI							
TITLE			DELETE	5.1 Tr		. 4.0			Change	Addition	1
NAME				5.2 N/							
STREET AODRESS						ADDRESS					1
CITY ST-ZIP				5.4 CI							
TIFLE			DELETE	6.1 TI					Change	Addition	1
NAME				6.2 N	ME				-		
STREET AODRESS				6.3 \$1	REET	ADDRESS					
CITY-ST-ZIP				6 4 CI	TY-\$1	T-ZIP					
		1 1 1 1 1 1 1 1	***								

1. I do herefy 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 chapted or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jetruny 26 1997

561-883-6735