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 # P96000028842 (8)

PAGE O'CONNOR FINE ARTS, INC.

FILED Jan 28 1998 8:00am Secretary of State



Principal Flace	e of business	Mailing Addre	Mailing Address						
8955 HIGHWAY 98 WEST SUTIE 103 DESTIN FL 32541		SUTIE 103	8955 HIGHWAY 98 WEST SUTIE 103 DESTIN FL 32541			DO NOT WRITE IN THIS SPACE			
5457		000111112 0				3. Date Incorporated or Qualified			
						04/03/1996			
2. Principal Pi	ace of Business	2a, Mailing Ac	ldres s			4. FEI Number	T.	Applied For	
21		26	26			59-3370238	ļ ļ	Vot Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					Additional	
22		27	27			5, Certificate of Status Desired	,	Required	
City & State		·-··	City & State			6. Election Campaign Financing	\$5.00	D May Be	
23		28	28			Trust Fund Contribution		to Fees	
Zip	Country	Zip	Cou	Country		8. This corporation owes or has paid the			
24	25	29	30			Personal Property Tax due June 30.		□ No	
	g. Name and Address of Cu	rrent Registered Agen		<u> </u>		10. Name and Address of New Register	ed Agent		
HAI	UGHT, BRUCE A			81	Name				
	HIGHWAY 98 E		OO Charle		Otto at Auto	700 B N - (- 1 N - 4 - 1 N - 1 N - 4 - 1 N - 1 N - 4 - 1 N - 4 - 1 N - 1 N - 4 - 1 N -			
	TE G		82 Street Ad		Street Add	dress (P.O. Box Number is Not Acceptable)			
	STIN FL 32541			83					
52.	51111 L GEST1			Ц					
				84	City	F	85 Zip	Code	
11 Pursuant I	o the provisions of Sections 607	0502 and 607 1608. Flo	orida Statutes, the al	nove	-named cor	rporation submits this statement for the purpos		ite registered	
Office or re	egi ste red agent, or both, in the S	tate of Florida. Such ch	ange was authorized	d by	the corpora	ation's board of directors. I hereby accept the	appointment a	s registered	
agent. I ar	m familiar with, and accept the ol	oligations of, Section 60	77.0505, Fiorida Stat	ules					
SIGNATURE .	Signature, typed or printed name of registerer	Sacord and little if sont cable	(NOTE Projetore	d Agor	al ejavalva tagi	uired when reinstating) DAT		·	
12.		AND DIRECTORS	13.	- Agei	in bigitatara requ	ADDITIONS/CHANGES TO OFFICERS		IRS IN 12	
TITLE	PD		DELETE 1.1 TO	TLF		ADDITIONS CHANGES TO OTHER 157	Change		
NAME	O'CONNOR, PAGE	_	1.2 NAME						
STREET ADDRESS	201 CALHOUN AVENUE		1.3 STREET ADDRESS		ADDRES				
CITY-ST-ZIP	DESTIN FL 32541		1.4 Cily-Si						
TALE		П	DELETE 2.1 TO		1-215		Change	Addition	
NAME			2.2 N				onongo		
STREET ADDRESS									
					ADDRESS	· ·		İ	
CITY - ST - ZIP TITLE			2. 4 CI DELETE 3.1 TIT		1-719	·	Change	Addition	
4		ليا					E change	L. Audillon	
NAME			3.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			34.0		T-ZIP				
TITLE		LJ	DELETE 4 1 TH				Change	Addition	
NAME			4. 2 N/						
STREET ADDRESS			4.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			4.4 Cr)		- ZIP				
TITLE		L	DELETE 5.1 TIT	5.1 TITLE			Change	Addition	
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 \$7	REE1 A	ADDRESS				
CITY-ST-ZIP			5.4 CIT	IY-SI	- ZIP				
TITLE			DELETE 6.1 TIT	LE			Change	☐ Addition	
NAME			6.2 NA	ME					
STREET ADDRESS					ADDRESS				
CITY-ST-7IP				IV. ST				·	

14. Thereby 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 13 if changed, or on an alachment with an address.