SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Sep 12 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000034590 (5)

BELL'S DECORATING, INC.

Principal Place	e of Business	Mailing Address			TILL BOSON SKORF OLDDE DRIVIN TOTAL DOLL JODA
8800 GEORGIA AVENUE WEST PALM BEACH FL 33405		6600 GEORGIA AVENUE WEST PALM BEACH FL 33405		DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
				04/22/1996	
2. Principal Pi	iace of Business	2a. Mailing Address		4. FEI Number	Applied I ² or
21		26		65-066 8331	Not Applicable
Suite, Apt.	#, e tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	۵	City & State		6. Election Campaign Financing	\$5.00 May Be
23	v	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	
24	25	29	30	Personal Property Tax due June	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	BINOWITZ, ALVIN		81 Name		
6800 GEORGIA AVENUE West Palm Beach FL 33405			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
AAC	OI PALM DEACH PL 33403		83		
			84 City		85 Zip Code
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the above-named cor	rporation submits this statement for the pation's board of directors. I hereby accep	ourpose of changing its registered
agent. I a	m familiar with, and accept the obli-	ations of, Section 607.0505, F	lorida Statutes.		
SIGNATURE	Signature, typed or printed name of registered as	ANCT and tille of proplembing (NC)	TE: Registered Agent signature requ	ind when rejectation)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	rabinowitz, alvin		1.2 NAME		
STREET ADDRESS	6600 GEORGIA AVENUE		1,3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 334		1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		the state of the s
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	•		4.3 STREET ADDRESS		
CITY-\$1-ZIP	<u> </u>		4.4 C(1Y - ST - Z(P		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 City-St-ZiP		Change Addition
TITLE		☐ vereit	6.1 TITLE 6.2 NAME		Fill priorities Fill sequinous
NAME STREET ADDRESS			6.3 STREET ADDRESS		
SITILL INDUITION			O.O OTTICE I HODITOO		

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.

6.4 CHY-ST-ZIP