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

Mailing Address

11079 SPRING HILL DR

**PROFIT CORPORATION** ANNUAL REPORT

1998

Principal Place of Business

11079 SPRING HILL DR

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Block 12 or Block 13 if changed



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000034639 (0) DOCUMENT #

1. Corporation Name

ART, CRAFT, BRIDAL & FRAME, INC.

SPRING HILL FL 34608 SPRING HILL FL 34608 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/22/1996 Applied For 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 59-3373891 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 8. Election Campaign Financing Trust Fund Contribution Added to Fees Zip Country Country Zip B. This corporation owes or has paid the current year Intangible X Yes 30 Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FINANCIAL FOUNDATIONS INC. 1301 **SEMINOLE BLVD #155** Street Address (P.O. Box Number is Not Acceptable) **LARGO FL 34640** 83 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 Signature, typod or printed name of registered agent and tille if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE MORAN, THEODORE S 1.2 NAME NAME **55**55 MARINER BLVD 1.3 STREET ADDRESS STREET ADDRESS **SPRING HILL FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - S1 - 2(P CITY-ST-ZIP

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

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**FILED** May 06 1998 8:00am Secretary of State



14. I 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 aroual 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 (352)683-7172

4/28/98

Change

Addition