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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## May 07, 1999 8:00 am Secretary of State

05-07-1999 90070 001 \*\*\*150.00

## DOCUMENT # **P96000035768**1. Corporation Name

QUICK DRAW TATTOOS, INC.

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Principal Place of Business Mailing Address							i iddiladi ile 1811e siili dalli edili derii da	100 stidt ditte senin i	#(5#) (#(t 1##5
2580 NE INDIA JENSEN BEACI	n river drive H FL 34957		2580 NE INDIAN RIVER DRIVE JENSEN BEACH FL 34957						
						!	OO NOT WRITE IN TH	IS SPACE	<del></del>
							3. Date Incorporated or Qualifed 04/22/1996		}
2 Principal P	lana of Rusinass	2a. Mailing Addre					4. FEI Number	I Apr	plied For
2. Principal Place of Business 2a. Maili 26			idining Address				65-0677673	<u></u>	Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.					\$8.75 A	
22		27	[27]				5. Certificate of Status Desired	Fee Red	quired
City & Stat	e	City & State	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	<del>-</del> , '			- 1	8. This corporation owes the current year		
24	25	29	<del></del>				Personal Property Tax. X Yes		□No
	9. Name and Address of Curre	int Registered Agent		81	Nam		10. Name and Address of New Registere	a Agent	
RIES	S, CHARLES H JR.			8,	(Vall)	<i>-</i>			
250 SW CHELSEA TERRACE				82	Stree	t Addres	ress (P.O. Box Number is Not Acceptable)		
	T ST LUCIE FL 34984								
				83					
				84	City		F	85 Zip C	iode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,					e-name	d corpor	ration submits this statement for the purpose	of changing its	registered
office or r	registered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such chang	e was authori:	zed by	the cor	poration	's board of directors. I hereby accept the app	ointment as reg	jistered
-	m raminar with, and accept the oblig	ations of, Section 607.03	JUJ, FIORIDA S	auces	•				}
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registe	red Ager	n signatur	e required v	when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	1	3.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	PT	DE!	LETE 1.	TITLE				Change	☐ Addition
NAME	RIESS, CHARLES H JR		1.	2 NAME					
STREET ADDRESS	2580 NE INDIAN RIVER DRIVI	#  -  -	1.5	3 STREE	ADDRES	s			}
CITY-ST-ZIP	JENSEN BEACH FL 34957			4 CITY-S	T-ZIP				
TITLE		☐ DEi	LETE 2.	TITLE		-		Change	Addition
NAME			2	2 NAME					-
STREET ADDRESS			2.3	3 STREE	TADORES	s	·		
CITY-ST-ZIP				4 CITY-S	T-ZIP				
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NAME			3.	2 NAME					}
STREET ADDRESS	}		3:	3 STREE	T ADDRES	5			1
CITY-ST-ZIP				4. CITY-5	T-ZIP			[] Chapas	Addition
TITLE		□ DE	1	1 TITLE		}		Change	[_] Addition
NAME				2 NAME		.}			}
STREET ADDRESS			₽		TADDRES	s}			;
CITY-ST-ZIP		DE		4 CITY-S	T-ZIP			Change	Addition
TITLE		U DE		1 TITLE 2 NAME		}		L1 Mande	[] ((((((()))))
NAME			- 1		TADORES	(e)			
STREET ADDRESS			1	3 S I REE 4 CITY-S		3			
CITY-ST-ZIP	<del> </del>	☐ DE		1 TITLE	,- 211"			[ ] Change	Addition
TITLE		LJ VE		2 NAME		}		C1 ammign	
NAME			•		TADORES	is			

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 suppliemental 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 affactiment with an address, with all other like empowered.

6.4 CITY-\$T-ZIP

SIGNATURE:

CRY-ST-ZIP

-334.9928