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

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90008 013 ***150.00

DOCUMENT # P96000049091

VINTAGE POSTER ART INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address			,		
925 S. DENNIN	G DR., STE. 1	925 S. DENNING DR., STE. 1					
WINTER PARK	FL 32789	WINTER PARK FL 32789			DO NOT WIDITE IN THE	IC ODACE	•
					DO NOT WRITE IN TH	S SPACE	
					3. Date Incorporated or Qualifed 06/06/1996		
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	A	pplied For
21	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	26			59-3433287	N	lot Applicable
Suite, Apt.	#. etc.	_ Suite, Apt. #, etc.				\$8.75	-Additional -
22	,,	27			5. Certificate of Status Desired Fee Required		
City & Stat	е	City & State			6. Election Campaign Financing	\$5.00	May Be
23	-	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Countr	у	This corporation owes the current year	ntangible	
24	25	—¬ ' r-	10	•	Personal Property Tax.	Yes	□No
241	9. Name and Address of Current	_ <u></u>	, ,,,		10. Name and Address of New Registere	d Agent	
9, Name and Address of Current Registered Agent							
CIPOLLARO, MICHAEL A							
110 E. READING WAY			82	82 Street Address (P.O. Box Number is Not Acceptable)			
WINTER PARK FL 32789				3			
			"	Ί			
			84	City	F	85 Zip	Code
					•	—	
11. Pursuant	to the provisions of Sections 607.0502	! and 607.1508, Florida Statutes of Florida, Such change was aut	s, the abor	/e-named / the come	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	or changing it ointment as r	egistered
agent. I a	im familiar with, and accept the obligation	ions of, Section 607.0505, Floric	ta Statute	S.	,,		-
SIGNATURE							
GIGHATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	Registered Ag	ent signature r	equired when reinstating) DATE		
12. ·	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
TITLE	D	☐ DELETE	1,1 TITLE		Cipollaro, Michael A. 2065 Venetian Way Widn Park 71.32789	change	Addition
NAME	CIPOLLARO, MICHAEL A		1.2 NAME		Cipolidio, Michael Mi		
STREET ADDRESS	200 110 2 12 12 17 17 17 17 17 17 17 17 17 17 17 17 17		1.3 STRE	ET ADDRESS	2065 Verletian Way	-	
CITY-ST-ZIP	WINTER PARK FL 32789 1.4		1.4 CITY-	ST-ZIP	Winter Park 71. 32787		
TITLE		☐ DELETE	2.1 TITLE		,	Change	Addition
NAMÉ			2.2 NAME				
"STREET ADDRESS			23STRE	ET ADDRESS		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
CITY-ST-ZIP			2. 4 CITY-	ST-ŽIP			_
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME		_	3.2 NAME				
ſ			8	ET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	3.4. CITY-			Change	Addition
TITLE		- Detric				9	_ · ····•
NAME	1		4. 2 NAM				
STREET ADDRESS	Į			ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-				CT Addition
TITLE	1	□ DELETE	5.1 TITLE			Change	Addition

CITY-ST-ZIP I hereby certify that the information supplied with his 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 artichment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP

DELETE

Change

☐ Addition