

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

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Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96-68708

1. Corporation Name

GoPop Art Shop, Inc.

Principal Place of Business

Mailing Address - same

2850 N. Oakland Forest Drive, Apt. 206
Oakland Park, FL 33309

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. State	26. Suite, Apt. #, etc	8/15/96	N/A
22. City & County	27. City & State	4. FEI Number	Applied For
23. Zip	28. Zip	65-0722685	Not Applicable
24. Country	29. Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	30. Country	☐	
		6. Election Campaign Financing	\$5.00 May Be Added to Fees
		Trust Fund Contribution	☐
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Susan J. Klebanow
2850 N. Oakland Forest Dr. #206
Oakland Park, FL 33309

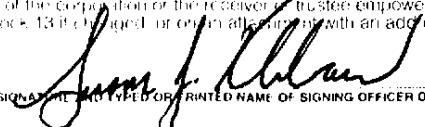
81. Name	Susan J. Klebanow
82. Street Address (P.O. Box Number is Not Acceptable)	2850 N. Oakland Forest Dr. #206
83. City	Oakland Park, FL 33309
84. City	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office and registered agent of 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 for the corporation and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE:  President DATE: 3/13/97

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE ☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
2. NAME	1.2 NAME
3. STREET ADDRESS	1.3 STREET ADDRESS
4. CITY - ST - ZIP	1.4 CITY - ST - ZIP
5. TITLE ☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
6. NAME	2.2 NAME
7. STREET ADDRESS	2.3 STREET ADDRESS
8. CITY - ST - ZIP	2.4 CITY - ST - ZIP
9. TITLE ☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
10. NAME	3.2 NAME
11. STREET ADDRESS	3.3 STREET ADDRESS
12. CITY - ST - ZIP	3.4 CITY - ST - ZIP
13. TITLE ☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
14. NAME	4.2 NAME
15. STREET ADDRESS	4.3 STREET ADDRESS
16. CITY - ST - ZIP	4.4 CITY - ST - ZIP
17. TITLE ☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
18. NAME	5.2 NAME
19. STREET ADDRESS	5.3 STREET ADDRESS
20. CITY - ST - ZIP	5.4 CITY - ST - ZIP
21. TITLE ☐ DELETE	6.1 TITLE ☐ Change ☐ Addition
22. NAME	6.2 NAME
23. STREET ADDRESS	6.3 STREET ADDRESS
24. CITY - ST - ZIP	6.4 CITY - ST - ZIP

14. I declare, by signing this statement, 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 furnished 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 a director, officer, or shareholder of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and address on Block 12 or Block 13 is changed, or on an attachment with an address.

SIGNATURE:  DATE: 3/13/97 (954) 462-4752

CR2E034 (9/96)