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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

ANNUAL REPORT 1997

DOCUMENT # P9600069149 (8)

-ART GLASS STUDIOS OF CENTRAL FLORIDA, INC.....

3869 WATERCREST DRIVE

3869 WATERCREST DRIVE

FILED Mar 07 1997 8:00am Secretary of State



	LONGWOOD FL 32779-235	* 1		
		1	3. Date Incorporated or Qualified 08/20/1996	3a. Date of Last Report
2. Principal Place of Business 21 3575 W. Lake Mary B	2a. Mailing Address	10.5.	4. FEI Number 59-33969/3	Applied For Not Applicable
Suite, Apt #, etc 22 SUN+6 103	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Lake Mary FL	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 Country	Zip	Gontry 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
	Current Registered Agent		10. Name and Address of New Re	gistered Agent
BOYLE, CONRAD J		61 Name		
500 EAST BROWARD BOULEV	/ARD	82 Street A	Address (P.O. Box Number is Not Acceptab	ole)
SUITE 1950 FORT LAUDERDALE FL 33394	ļ	63		
•		84 City		FL 85 Zip Code
" // // // // // // // // // // // // //	507,0502 and 607,1508, Florida Statut is State of Florida. Such change was ne obligations of, Section 607,0505, Florida.	les, the above-named cauthorized by the corporida Statutes.	corporation submits this statement for the position's board of directors. I hereby accel	ourpose of changing its registered of the appointment as registered
SIGNATURE. Signalize, typed or printed finine of reg.	stered agent and title if applicable (NO)	E- Registered Agent signature i	required when reinstalling)	DATE
12. OFFICE	ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THEE D	☐ DELETE			☐ Change ☐ Addition
11111 J D	☐ Deteri	1.1 TITLE		Change Applicati
		1.1 TITLE 1.2 NAME		in thange in Application
	3	ľ		Change Z Abbillon
NAME HAMMOND, ELEANOR E 3869 WATERCREST DRI	3	1.2 NAME		Change Author
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information indicated on this arrival report or 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 arrival 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.

SIGNATURE: