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

PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # DOCODOOTOCA (1)

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997	,

## FILED May 06 1997 8:00am Secretary of State

1. Corporation Name ART EXPRESSIONS USA INC.  Principal Place of Business Mailing Address 7434 BILTMORE DRIVE SARASOTA FL 34231 SARASOTA FL 34231-7909							
					3. Date incorporated or Qualified 10/21/1996	3a. Date of Last R	eport
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
21		26			65-07/0385		ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	_j <b>\$8.75</b> . Fee Re	
City & Stai	le	27 City & State	/		6. Election Campaign Financing	\$5.00	<u> </u>
23		28				DO.CO	
ZID	Country	Žip	Country		8. This corporation has liability for inte		
24	25	29	30		1	Yes No	
	9, Name and Address of Cu	urrent Registered Agent	81 N	ame	10. Name and Address of New Region	itered Agent	
	IA, RICHARD D ESQ. 3 MAIN STREET						
	TE 303		82 5	treet Addre	ess (P.O. Box Number is Not Acceptable	)	
	ASOTA FL 34237		83	<del></del>			
4.00			<b>84</b> C	ity		- 85 Zip	Code
						FL 2	
SIGNATURE	Signature, typed or punted name of register		OFE: Registered Agent si		on's board of directors. I hereby accept to when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	
12.	D	DELETE	13.	7.0	IPIS IT	L Change	S IN 12 Addition
NAME	YEATES, MARA		1.2 NAME	3	MAPA	Mary averiga	
STREET ADDRESS	7434 BILTMORE DRIVE		1.3 STREET ADD	RESS 7	424 Rillmore Drive		Addition
C(TY+ST-ZIP	SARASOTA FL 34231		1.4 CITY-ST-Z	P 5	AR45074, FL 34231		
THLE		☐ DELETÉ	21 TITLE			Change	Addition
NAME			2.2 NAME				
STHEET ADDRESS			2.3 STREET ADD				
CHY-ST-ZIP THILE		DELETE	2.4 CITY-ST-Z	'IP		Change	Addition
NAME		E DETENT	3.2 NAME	1		☐ cuante	L) Addition
STREET ADDRESS			3.3 STREET ADO	HREES			
CiTY-ST-ZIP			34 City-St-z	1			i
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME	ł			
STREET ADDRESS			4.3 STREET ADD	RESS			
CITY-ST ZF			4.4 CITY - ST - ZI	Р			
TITLE		DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADD	ŀ			Ì
Cily-Si-ZiP		Theirt	5.4 C(TY - ST - Z)	IP		[] Chan	Addition
TITLE		☐ DELETE	6.1 TITLE	}		Change	Addition
NAME			6.2 NAME				Į
STREET ADDRESS			6 3 STREET ADD	ı			
CiTY-SI-Zi <sup>S</sup>	by costifut that the information ou	polied with this filing does not gu	6.4 CITY - ST - Zi		in Section 119 07(3)(i) Florida Statutes	I further certify that	the

14. I do hereby certify that the information supplied with this filling 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 attachment with an address.

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/97 (941) 924-8913 Daytine Phone !