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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1998 8:00am

Secretary of State

305.11.2.4122

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000093555 (6)

ST. PETERSBURG GALLERY, INC.

						<u> </u>											
Principal Place of Business Mailing Address																	
424 BEACH DRIVE NE 424 BEACH DRIVE NE																	
SUITE 102 ST. PETERSBURG FL 33701				Suite 102 St. Petersburg Fl 33701						DO NOT WRITE IN THIS SPACE							
OI. YEIEROO						3. C	3. Date Incorporated or Qualified										
										11/13/19	996						
2. Principal Pi	lace of Busi	ness	2a.	2a. Mailing Address					4. F	4. FEI Number						Appli	ed For
21			26							65-07	13216					Not A	pplicable
Suite, Apt	#, etc.		ļ	Suite, Apt. #, etc.					5. C	Certificate	of Status	Desired	d [	]	\$8.7		-
22			27													Requ	
City & State	е		$\vdash$	City & State						Election Ca			-	_	\$5.0		
23		28	Z-p Country						rust Fund						d to f		
Zip		Country	200	24,	30	Couriny				This corpo Personal P				_	ent year ] Yes	Intang	
24	o Name	25    and Address of 0	29   Current Regist	ered Agent	130					Name and	<u> </u>				<u> </u>	_==-:	
	<del></del>	WIS G ESQ.				81	4	Vame	101 -				<b>_</b> _				
							_										
1320 S. DIXIE HIGHWAY							٤	Street Address (P.O. Box Number is Not Acceptable)						)			
SUITE 700 CORAL GABLES FL 33146							-										
00	INT CADE	EO 1 C 33140					_								1		
						84	(	City						FL	85   Z	ip Co	ae
11. Pursuant	to the provis	sions of Sections 60	07.0502 and 60	07.1508, Florida <b>Sta</b>	atutes, th	ne above	l ə-n	amed ¢	corporation	submits th	nis statem	ent for	the pur	pose of	changin:	gitsn	egistered
office or re	egi <b>ste</b> red a	gent, or both, in the	: State of Florid	la Such change wa Section 607.0505,	as autho	rized by	/ th	ie corpo	oration's bo	ard of dire	ectors. I h	iereby a	accept t	he appo	intment	as reg	gistered
_	in ignimum m	min, and decept the	Congruend of	. 60001011 807.56003,	rionac	Olalolo	•										
SIGNATURE	Signature, type	d or printed name of regist	ered agent and little i	rappicable (f	NOTE Regi	istered Age	ent e	egnalure re	equired when re	einstaling)				DATE			
12.		OFFICE	RS AND DIREC			13.			AD	DDITIONS	/CHANG	es to c	OFFICE				_
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NAME	GRAYS	on, eric				1.2 NAME											
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CITY-ST-ZIP	<del>W.</del> NEV	V YORK-NJ				2 4 CITY-5	ŝT- i	ZIP									1
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CITY-ST-ZIP						64 CITY-S		1									
14. I hereby o	certify that the	ne information supp	hed with this fi	ling does not qualif	v for the	exemp	tio	n stated	d in Section	119.07(3)	)(i), Florid	a Statut	les. I fu	rther cer	tify that	the in	formation
indicated.	on this anni	ual report or supple	emental annual	report is true and a rustee empowered	accurate	and tha	at r	mv siana	ature shall l	have the s	same lega	at effect	tas if m	iade und	ler oath:	that I	am an
Block 12	or Block 13	if changed, or on a	in attachment	vith an address.	, S S NO 0		۰-	00 1		2p.01	1 1		,, wi		,	ų. p. 2.	