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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000011704 (8) DOCUMENT #

FRAMED WITH FINESSE, INC.

Principal Place of Business

Mailing Address

FILED Mar 24 1998 8:00am Secretary of State



| 1771 RAVINE SIDE DRIVE JACKSONVILLE FL 32225 | | 1771 RAVINE SIDE DRIVE JACKSONVILLE FL 32225 | | | |
|-------------------------------------------------|----------------------------------------------------|-------------------------------------------------|---------------------------------|------------------------------------------------------------------------------------------------------|----------------------------|
| MONOCHTIL | at 1 t veets | SUMMODIFICATION OF SECTION | | DO NOT WRITE IN THI | S SPACE |
| | | | | Date Incorporated or Qualified 02/03/1997 | |
| 2. Principal Place of Business | | 2a. Mailing Address | | 4 EEI Number | Applied For |
| 21 | | 26 | | 59-3430485 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | 6. Certificate of Status Desired | Fee Required |
| City & State |) | City & State | | Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Country | 8. This corporation owes or has paid the o | |
| 24 | 25 | | 30 | Personal Property Tax due June 30. | Yes No |
| | 9. Name and Address of Currer | t Registered Agent | 04 14 | 10. Name and Address of New Registers | d Agent |
| | LABUSHKA, GEORGE J | | 81 Name | | |
| 1771 RAVINE SIDE DRIVE | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| JACKSONVILLE FL 32225 | | | | | |
| | | | 83 | | |
| | | | 84 City | | 85 Zip Code |
| | | | | F | |
| 11. Pursuant t | o the provisions of Sections 607.050 | 2 and 607.1508, Florida Statute | s, the above-named cor | rporation submits this statement for the purpose | of changing its registered |
| agent. La | m familiar with, and accept the oblig | ations of, Section 607.0505, Flor | ida Statutes. | ation's board of directors. I hereby accept the a | ppointilloit do logistarsa |
| SIGNATURE | | | | | |
| ordin tronc | Signature, typed or printed name of registered age | | Registered Agent signature requ | | |
| 12. | OFFICERS AN | | 13. | ADDITIONS/CHANGES TO OFFICERS A | Change Addition |
| ₹ĦŢĹ€ | D SALABUSERA OFORES | ☐ DELE te | 1.1 TITLE | | |
| NAME | BALABUSHKA, GEORGE J | | 1.2 NAME | | |
| STREET ADDRESS | 1771 RAVINE SIDE DRIVE | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32225 | | 1.4 DITY-ST-ZIP | | [] Otanaa [] Addision |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | BALABUSHKA, CAROL H | | 22 NAME | | |
| STREET ADDRESS | 1771 RAVINE SIDE DRIVE | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32225 | Top. cr | 2. 4 CITY-ST-ZIP | | Change Addition |
| TITLE | | ☐ DELETE | 3.1 TIFLE | | Change Addition |
| NAMÉ | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | T never | 3.4. CITY-ST-ZIP | | Change Laddition |
| TITLE | | ☐ DELETE | 4.1 TIFLE | | Change Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | - December | 4.4 CITY-ST-ZIP | | Change Addition |
| TITLE | | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | |
| TITLE | | DELETE | . 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | ······································ | 6.4 CITY-ST-ZIP | | |
| indicated | on this applied conoct of supplements | al annual renort is true and acci- | irate and that my signat | n Section 119.07(3)(i), Florida Statutes. I further ture shall have the same legal effect as if made | under oath: that I am an |
| officer or a | director of the cornoration or the rec | eiver or trustee empowered to e | xecute this report as rec | quired by Chapter 607, Florida Statutes; and the | at my name appears in |
| Block 12 | or Block 13 if changed, or on an all | coment with an address. | | / / / | |