

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000016402 (4)**

1. Corporation Name

SICRE FINE ARTS INC.

Principal Place of Business

4331 ALTON ROAD
MIAMI BEACH FL 33140

Mailing Address

4331 ALTON ROAD
MIAMI BEACH FL 33140

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

28

Zip

24

Country

29

Country

30

9. Name and Address of Current Registered Agent

**LOPEZ, PETER M
1111 LINCOLN ROAD STE 500
MIAMI BEACH FL 33139**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

TITLE

D

DELETE

1.1 TITLE

NAME

SICRE, CANDIDA

1.2 NAME

STREET ADDRESS

4331 ALTON ROAD

1.3 STREET ADDRESS

CITY-ST-ZIP

MIAMI BEACH FL 33140

1.4 CITY-ST-ZIP

TITLE

DELETE

2.1 TITLE

NAME

DELETE

2.2 NAME

STREET ADDRESS

DELETE

2.3 STREET ADDRESS

CITY-ST-ZIP

DELETE

2.4 CITY-ST-ZIP

TITLE

DELETE

3.1 TITLE

NAME

DELETE

3.2 NAME

STREET ADDRESS

DELETE

3.3 STREET ADDRESS

CITY-ST-ZIP

DELETE

3.4 CITY-ST-ZIP

TITLE

DELETE

4.1 TITLE

NAME

DELETE

4.2 NAME

STREET ADDRESS

DELETE

4.3 STREET ADDRESS

CITY-ST-ZIP

DELETE

4.4 CITY-ST-ZIP

TITLE

DELETE

5.1 TITLE

NAME

DELETE

5.2 NAME

STREET ADDRESS

DELETE

5.3 STREET ADDRESS

CITY-ST-ZIP

DELETE

5.4 CITY-ST-ZIP

TITLE

DELETE

6.1 TITLE

NAME

DELETE

6.2 NAME

STREET ADDRESS

DELETE

6.3 STREET ADDRESS

CITY-ST-ZIP

DELETE

6.4 CITY-ST-ZIP

14. I hereby certify 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 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: *Sandra B. Martham*

4/12/98



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/18/1997

4. FEI Number

65-0737391

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Added to Fees

7. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

Yes

No

CR2E034 (10/97)