PROFIT CORPORATION ANNUAL REPORT



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FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

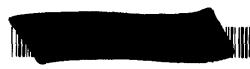
Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000034031 (9)

TATIANA K FINE ART INC.

FILED May 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 9350 SOUTH DIXIE HIGHWAY, PH2 9350 SOUTH DIXIE HIGHWAY. PH2 MIAM! FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 04/15/1997 2 Principal Place of Business 11 950 N.E. 174 37007 24 Mailing Address 26 ISON.E. 174th STORT Applied For Not Applicable Suite. Apt #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required \$5.00 May Be Election Campaign Financing N. Miami Binch, Floris Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent Name and Address of New Registered Agent Name KATSMAN, MARK 9350 SOUTH DIXIE HIGHWAY, PH2 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** Zip Code 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 objigations of, Section 607 0505. Florida Statutes, TATYANA KOGAN - PRESIDENT
INCIE Registered Agent signature required when reinstating) Kogan. SIGNATURE re frame of registered adopt and the it appropaga OFFICERS AND DIRECTORS **PSD** DELETE Change Addition TITLE 11 TITLE KOGAN, TATIANA NAME 1.2 NAME 1121 NE 200TH TERR STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BEACH FL 33179 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition TITLE 21 TITLE IGNATYEV, SERGEY NAME 2.2 NAME 1121 NE 200TH TERR STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI BEACH FL 33179 CITY-ST-ZIP 2 4 C!1Y - ST - ZIP DELETE Change Addit on TITLE 3 1 TITLE 32 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 34 CITY - ST-ZIP DELETE Change no tibbA ... TITLE 4 1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST ZIP 4 4 CITY - ST - ZIP DELETE Change no hobA TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 011Y - \$1 - 2(P 5.4 CiTY - \$1 - ZiP Add hor DELETE 61 TITLE Change NAME 6.2 NAME -05/28/98--01024---043 STREET ADDRESS 6.3 STREET ADDRESS ***150.00

11 Thereby 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 change 200 or an attachment with an address

SIGNATURE Tationa Kogan. TATYANA KOGAN-PRESIDENT 4-29-98