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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000040355 (4)

ARTISTIC SEALING & CONSTRUCTION CORP

	_				
Principal Place of Business Mailing Address					i tabisadi ilo sotii perii sotii dotii dotii dotii dotii dusii dusii dusii distii diii iloti
13100 N.E. 3 CT. 13100 N.E. 3 CT. MIAMI FL 33161					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/06/1997
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc.		Suite, Apl. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	Z(p	30 Cou	ntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
ALFONSO, HUMBERTO D 3280 W. PALM AVENUE SUITE 8 HIALEAH FL 33014			83	ress (P.O. Box Number is Not Acceptable)	
				84 City	FL 85 Zip Code
agent I a	Signature, typed or printed name of registered ages	I/OUSO Tano title if applicable (NC	tomi	utes. To D. Agent signature require	
TITLE	OFFICERS AND	DELETE	11 TI	n F	Change Addition
NAME STREET ADDRESS CHTY-ST-ZIP	ALFONSO, HUMBERTO D 3280 W. PALM AVENUE, #8 HIALEAH FL 33014		1.2 N/ 1.3 ST		
TITLE	D	DELETE	2.1 T/		Change Addition
NAME STREET ADDRESS	TORRESO, JUAN N 13100 NE 3 CT		2.2 N/ 2.3 S1	ME REET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33161	☐ DELETE		TY-ST-ZIP	Change Additio
TITLE NAME		□ DELETE	3.1 Ti	1	ET Cliange ET Additio
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP			3.4. C	TY-ST-ZIP	
TITLE		☐ DELETE	4.1 T/	LE	Change Addition
NAME			4. 2 N		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CI 5 1 TI	ry-ST-ZIP	Change Addiilo
NAME		,	5.2 N/		L. Onango L. Rudnio
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				TY - ST - ZIP	
TITLE		DELETE	6.1 Tr		Change Addition

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 supplied 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 trusted 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

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

Manko

***150.00

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FILED

Jun 19 1998 8:00am

Secretary of State