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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Wortham

Secretary of State 1
DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000042560 (7)

NORTHERN KNIGHTS FINE ART CORPORATION

FILED Aug 07 1998 8:00am Secretary of State

				-	- 1
Principal Place of Business Mailing Address					
1271 LAQUINTA DRIVE. SUITE 4 1271 LAQUINTA DRIVE. SUITI			E. SUITE 4		
ORLANDO FL 32	09	ORLANDO FL 32809			DO NOT WRITE IN THI S S PACE
					3. Date Incorporated or Qualified
				-	05/09/1997
2, Principal Place	of Business	2a. Mailing Address			4. FEI Number Applied For
21 Suite, Apt. #, e	<u> </u>	Suite, Apt. #, etc.			S9 344)041 Not Applicable
22		27			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City 8		City & State	& State		6. Election Campaign Financing _ \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Curre	29 Int Registered Agent	30		Personal Property Tax due June 30. Li Yes Li No 10. Name and Address of New Registered Agent
ANISH	PAUL		·- 	81 Nar	Name
1271 LAQUINTA DRIVE, SUITE 4				82 Street Address (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32809				02 300	The et Address (1.0. box Mainter 15 Not Acceptable)
				83	
			ţ	84 City	City 85 Zip Code
44 O vovent to th	77 N	00	tutos the ob		FL 63 2.19 Code
office or regis	stered agent, or both, in the Stat	e of Handa. Such change wa	itiles, ine at is authorized	by the	amed corporation submits this statement for the purpose of changing its registered accept the appointment as registered accept the appointment as registered
	imiliar witri, arip accept time occ	gallonis of Section 602:0505.	10 '	- /	7/18/14
SIGNATURE			vOIE Registered	Agent sign	signature required when reinstating) NATE
12.	OFFICHES A	ND DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	resident Varia	L I DELETE	1.1 111		Change Addition
NAME NAME	laktiviski izazzy	ts Finest			DOTAGE .
STREET ADDRESS CITY-ST-ZIP	a la social El	27800		REFT ADDRE Y-ST-ZIP) i
TITLE T	manab res	DOLLETE	2 1 70		Change Addition
NAME	aut mist	West dent	2.2 NA		
STREET ADDRESS	Paul Anish 1271 Laguirtas	or some	2351	REET ADDRE	DRESS
CITY-ST-ZIP	orlando FL	52001	2.40	TY-ST-7IP	
TITLE		L DELETE	31717		Change [_ Addition
NAME			3.2 NA		
STREET ADDRESS			1	REET ADDRE	
CITY-ST-ZIP TITLE		DELETE	3 4. UI	TY-ST-ZIP	Change Addition
NAME			4 2 N/		
STREET ADDRESS			4.3 ST	REET ADDRE	DRESS
CITY-ST-ZIP			4.4 CI)	Y-ST-ZIP	IP
TITLE		DELETE	5.170	l E	☐ Change ☐ Addition
NAME			5.2 NA		
STREET ADDRESS				REE1 ADDRE	
CITY-ST-ZIP		DELETE		Y - \$1 - ZIP	IP ChangeAddition
NAME		L_3 SELECT	6.1 TIT 6.2 NA		Diange DE
STREET ADDRESS			1	nie Reet addre	78.7
CITY-ST-7IP				1661 MDDN6 Y-ST- <i>7</i> 1P	
	by that the information supplied:	with this filing does not qualif			n stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information

indicated on this annual report of supplicmental 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 entactiment why saynddress.

CIONATURE.