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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 08 1998 8:00am Secretary of State

DECORATIVE ARTS & FINE ANTIQUES, INC.									
DECO	NATIVE ANTO OL FINE ANT	IGUES, INC.					A REMOTER HIN LANGU HARRI ARRIV ARRIV ARRIV ARRIV		1 0.10 1311 1 00 1
-2:1-:									
Principal Place of Business Mailing Address									
8315 N.E. 14TH COURT 3315 N.E. 14TH COURT FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304							ļ		
TOTAL DADGE	ENDALE TE 00004	TOM ENODE	TORCE PE 33304				DO NOT WRITE IN TH	HIS SPACE	
							3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address							06/03/1997		
_ `	Tace of Business	28. Mailing Address					4. FEI Number Applied For		
Suite, Apl.	# etc	Suite, Apt. #, etc.			65-0756702	CQ 75 Additional			
2			27				5. Certificate of Status Desired		Required
City & Stat	le		City & State				6. Election Campaign Financing	\$5.00	May Be
3		28	28			,	Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country				8. This corporation owes or has paid the current year Intangible		
14	25	29	30					No	
	9. Name and Address of Curr	rent Registered Agen	<u> </u>	81	Name		10. Name and Address of New Register	ed Agent	
	JTTVEG, DEBORAH M 15 N.E. 14TH COURT								
	ORT LAUDERDALE FL 33304					Addre	ddress (P.O. Box Number is Not Acceptable)		
10	ON ENOUGHDALE IE 33304		•						
				<u> </u>					
	•			84	City		F	=L <mark>85</mark> Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Flo	rida Statutes, the	abov	e-name	d corpo	oration submits this statement for the purpos	e of changing	its registered
office or r agent. I a	registered agent, or both, in the Sta am familiar with, and accept the obl	ite of Florida. Such chi ligations of, Section 60	ange was authori 7.0505, Florida S	ized by Statute	y the co s.	rporatio	on's board of directors. I hereby accept the	appointment as	s registered
SIGNATURE	•								
	Signature, typind or printed name of registered agent and title if applicable (NOTE Regis				ent signatu	re required	d when reinstating) DAI		
12.	OFFICERS AND DIRECTORS DELETE			13.		т	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change	RS IN 12 Addition
TITLE NAME		u		2 NAME		l b		L. J Ollarige	X-X-X-XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
STREET ADDRESS			4		r annorce		eborah M Guttveg		1
CITY-ST-ZIP							315 NE 14th Ct	7770/	
TITLE				1 TITLE	31 - ZIF	+++	t. Lauderdale, Fl.	33304 L.J. Change	Addition
NAME			2.2 NAME					_	
STREET ADDRESS	.]		2.	2.3 STREET ADDRESS					
CITY-ST-ZIP			2.	2.4 CITY-ST-ZIP					İ
TITLE	DELETE			3.1 TITLE				Change	Addition
NAME			32 N			Ì			
STREET ADDRESS			3.	3 STREET	ADDAESS	1			
CITY-ST-ZIP				4. CITY-	ST-ZIP	1			
TITLE		Ц		1 TITLE		1		Change	L ∆ddition
NAME				2 NAME		1			ļ
STREET ADDRESS					ADDRESS				
City-St-ZiP Title				4 CITY-S	SI-ZIP	 -		Change	Addition
NAME		U	1	2 NAME					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS			I -		ADDRESS	1			
CITY-ST-ZIP			L.	a City-S		1			
TITLE				1 TITLE	21 En	1		Change	Addition
NAME		1-1-		2 NAME				. •	
STREET ADDRESS			6.	3 STREET	ADDRESS	1			
CITY-ST-ZIP				4 CITY-5					
	certify that the information supplied	with this filing does no	ot qualify for the	exemp	tion sta	ted in S	Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the	e information

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

A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.

THE PARTY OF THE P

1-30-98 (954)566-4888