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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000055483 (6)

FRAMES BY HELEN, INC.

FILED Jan 22 1998 8:00am Secretary of State



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Mala

Principal Place	of Business	Mailing Address			-		1100 1111 1001
5556 HARBORSIDE DRIVE 5556 HARBORSIDE			DRIVE				
TAMPA FL 336		TAMPA FL 33615			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					Table 1		
2. Principal Pl	ace of Business	2a. Mailing Address , ,			06/24/1997 4. FE! Number		pplied For
21 10059	W. HILLS BOROUGH		USBO	ROUGH	59-3457568	 	lot Applicable
Suite, Apt. 1		Suite. Apt. #, etc.		AVE.			Additional
22			•		5. Certificate of Status Desired		Required
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23 TAMPA Ph 28 TAMPA FR					Trust Fund Contribution		l to Fees
Zip Country 7 Ip Country					8. This corporation owes or has paid the cu		ntangible
24 33615 25 USA 29 33615 30 USA					Personal Property Tax due June 30. X Yes No		
	8. Name and Address of Current	Registered Agent		 	10. Name and Address of New Registered	Agent	
PHILLIPS, JERROLD K ESQ 81 Name					SAME		
101 E KENNEDY BLVD., SUITE 4130			82 Street Addre		ss (P.O. Box Number is Not Acceptable)		
TAMPA FL 33802					1		
			83	3			
			84	City		85 Zip	Code
				1	FI	<u>-</u> `	
office or re	o the provisions of Sections 607 0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was au	uthorized b	by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing pointment as	its registered s registered
•	,						
SIGNATURE Signature, typod or printed name of registered agent and title 4 applicable (NOTE: Registered Agent signature required					d when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D DELETE		1.1 TITLE			Change	☐ Addition
NAME	Brown, Richard Burton J	Ř	- 1.2 NAME				
STREET ADDRESS	5556 HARBORSIDE DRIVE		1.3 STREE	1 ADDRESS			
CITY - ST - ZIP	TAMPA FL 33615		1.4 CITY - ST - ZIP				
TITLE	D	DELETE	2.1 TITLE			Change	L_J Addition
NAME	Ditottit, tituat Cook		2.2 NAME				
STREET ADDRESS	5556 HARBORSIDE DRIVE		2.3 STREE	1 ADDRESS			
CITY-ST-ZIP	TAMPA FL 33615		2. 4 CITY - ST - ZIP				
TITLE	DELETE		3.1 TOLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREF	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	-S1-7IP			
TITLE		L DELETE	4.1 TITLE	1		L Change	Addition
NAME			4. 2 NAME	.			
STREET ADDRESS			4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			gare
TITLE		[_] DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME	-			
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	S1 - ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME	[
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CITY				
14. I hereby c	ertify that the information supplied with on this appual report or supplemental	th this filing does not qualify for tannual report is true and accu	the exemplinate and the	ption stated in S nat my signature	Section 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made u	ertify that the inder oath: th	e information nat I am an
officer or o	director of the corporation or the rece	iver or trustee empowered to ex	xecute this	report as requi	red by Chapter 607, Florida Statutes; and that	l my name ar	ppears in
Block 12 c	or Block 13 if changed, or on an attac	nment with an address.			1	813-	- 1

DR R RAGIN 10