

DOCUMENT # P97000061819

1. Entity Name  
BUILDING 516, INC.

Principal Place of Business  
516 NE 13 STREET  
FT LAUDERDALE FL 33304

Mailing Address  
516 NE 13 STREET  
FT LAUDERDALE FL 33304

2. Principal Place of Business  
200 W. Colorado  
Suite, Apt. #, etc.

3. Mailing Address  
200 W. Colorado  
Suite, Apt. #, etc.

City & State  
Telluride, CO  
Zip  
81435  
Country

City & State  
Telluride, CO  
Zip  
81435  
Country

FILED  
00 DEC 19 PM 12:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0768070  
Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
INCORPORATORS PLUS, INC.  
1214 N UNIVERSITY DRIVE  
PLANTATION FL 33322

7. Name and Address of New Registered Agent  
Name Corp Direct Agents  
Street Address 103 N. Meridian St.  
Lower Level  
City Tallahassee FL Zip Code 32301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE DATE 12-19-00  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.  (See criteria on back)

~~FILE NOW!!! FEE IS \$550.00~~  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, LAURIE LEE 516 NE 13 STREET FT LAUDERDALE FL 33304 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Clark, Laurie Lee <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 205 E. Colorado Ave. - Box 1975 Telluride, CO 81435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	400003514654-3 -12/27/00-01073-004 ****150.00 ****150.00 LS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE 12-19-00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

*- Do NOT Detach -*

*- 2 -*

# APROPOS EDITIONS

INTERNATIONAL FINE ART PUBLISHER  
A Florida Corporation

**P97000061819**

*September 18, 2000*

*Division of Corporations  
Uniform Business Report Filings  
Box 1500  
Tallahassee, FL 32302-1500*

*Re: Late Filings*

*To whom it may concern. I spoke to a gentleman in your office today regarding the following problem, which he instructed me to enclosed checks in the amount of \$150.00 for each active corporation.*

*Please consider the following. We are an active corporation, which has relocated our offices. Through the process of moving, the Postal Service has failed to forward from your office, making the prompt payment of these filings impossible. In fact, the new tenants of our previous location forwarded these to us this last week. We sincerely hope that you will understand that these circumstances were out of our control and accept the untimely arrival of this document with amounts enclosed.*

*Your kindness and generosity are greatly appreciated.*

*Sincerely,*

  
*Laurie Lee Clark*