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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000069968 (0)

GALLERY UNIQUE, INC.

FILED Mar 18 1998 8:00am Secretary of State

<u>i infiliati ika kaki indali dalik dalik dalik dalik dalih dalih dalih dilik dalih d</u> Principal Place of Business Mailing Address 78 SOUTH LUCILLE STREET 78 SOUTH LUCILLE STREET BEVERLY HILLS FL 34465 BEVERLY HILLS FL 34485 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/13/1997 2a. Mailing Address 2. Principal Place of Business Applied For 59-34 Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Personal Property Tax due June 30. ame and Address of Current Registered Agen 10. Name and Address of New Registered Agent AMERILAWYER CHARTERED ZELTZER 343 ALMERIA AVENUE 82 s (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-fiamed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ICERS AND DIRECTORS 13. DELETE ☐ Change ☐ Addition TITLE 1.1 TITLE ZELTZER, GARSON NAME 1.2 NAME 78 SOUTH LUCKLE STREET STREET ADDRESS 1.3 STREET ADDRESS **BEVERLY HILLS FL 34465** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ■ Addition TITLE 2.1 TITLE ZELTER, JUDY L 2.2 NAME STREET ADDRESS 78 SOUTH LUCILLE STREET 2.3 STREET ADDRESS **BEVERLY HILLS FL 34465** CITY-ST-ZIP 2.4 City-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change Addition 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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 ennual report or supplemental 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 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 attaghment with an address.

SIGNATURE:

T.