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 # P97000073471 (9)

ART TODAY, INC.

Principal Place of Business

Mailing Address

FILED Jan 20 1998 8:00am Secretary of State



2516 PONCE DE LEON BOULEVARD CORAL GABLES FL 33131		2516 PONCE DE LEON BOULEVARD CORAL GABLES FL 33131					
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						08/25/1997	
2, Principal Pi	ace of Business	2s. Mailing Address				4. FEI Number 45-07-80572 Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required	
City & State		City & State					
 '	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 Zip	Country	7(p)	Cour	ntrv		This corporation owes or has paid the current year Intangible	
24	25	29	30	,		Personal Property Tax due June 30. Yes No	
24	Name and Address of Curre		1001			10. Name and Address of New Registered Agent	
POI				BI	Name		
PORTER, GLENN 100 SOUTHEAST 2ND STREET						(D O D. H. allaria Mal Association)	
					82 Street Address (P.O. Box Number is Not Acceptable)		
	TE 3700 MI FL 33131		1		83		
,,,,,,			-	84	City	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named 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.							
•	m tamınar with, and accept the obii	galions of Section 607.0505, ri	ionoa Stati	uies	•		
SIGNATURE	Signature typed or printed name of registered a	gent and title if applicable (NO	H Registered	l Ager	ni signature r	equired when reinstating) DATE	
12.	OFFICERS A	VD DIRLCTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ OELETE	1.1 T(T	ιE		Change Addition	
NAME	SCWARTZ, ANA S		1.2 NA	ME		SCHWARTZ, ANA STELLA,	
STREET ADDRESS	2516 PONCE DE LEON BOU	JLEVARD	1.3 ST	REE1	ADDRESS	D Exchange Addition SCHWARTZ, ANA STELLA 2516 PONCE DE LEON BLUD CORAL GABLES, FL 33/34 Change Addition	
CITY-ST-ZIP	CORAL GABLES FL 33131		1.4 CIT	TY-\$1	1-ZIP	CORAL GABLES, FL 33/34	
TITLE		☐ DELETE	2.1 10	ιF		Change Addition	
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 STREE		ADDRESS		
CITY-ST-ZIP			2. 4 CITY -		iT - ZIP		
TITLE		DELFTE	3.1 1(1	LE		☐ Change ☐ Addition	
NAME			3.2 NA	3.2 NAME			
STREET ADDRESS			3.3 \$1	REFT	ADDRESS		
CITY-ST-ZIP			3.4. CI	ITY-\$	5T - 7IP		
TITLE		DELETE	4.1 1/3	LF		☐ Change ☐ Addition	
NAME			4. 2 N/	AME			
STREET ADDRESS			4.3 ST	REET	ADDRESS		
CITY-ST-ZIP			4.4 CI	14 - S1	1-2IP		
TITLE		DELETE	5.1 111	LE		Change Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REE1	ADDRESS		
CITY-ST-ZIP			5 4 01	1Y - S1	1 - 21P		
TITLE		DELETE	61 717	ILE		Change Addition	
NAME			6.2 NA	ME:	- 1		
STREET ADDRESS			6.3 ST	REE1.	ADDRESS		
CITY-ST-ZIP			6.4 811				
44 I horoby o	certify that the information supplied	with this filing does not qualify t	for the exe	mpt	tion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated on this amnual report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 attachment with an address.							