Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90052 048 ***150.00

- I KORRINGEN NIG KONKA KORRI BORKA TORKK OTIKK OCIKA KORRI KORRI KORRI KARIK KORRI BARIK KARIK EKIR KORRI

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000073744

1. Corporation Name

FRAN'S CERAMICS & GIFTS, INC.

Principal Place of Business Mailing Address						f (Bålith) tin fåltt fålt polit abilt dans sallt losso itni fadtt liten etni isn		
7500 ULMERTON ROAD #30 LARGO FL 33771		7500 ULMERTON ROAD #30 LARGO FL 33771			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified 08/25/1997		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21		26				59-3474175 Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>			5. Certificate of Status Desired		
22		City & State						
City & State		28			6. Electic n Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zip	Cor	intry		8. This corporation owes the current year Intangible		
24	25	29	30			Personal Property Tax. Yes No		
	9. Name and Address of Curre	ent Registered Agent		<u> </u>		10. Name and Address of New Registered Agent		
				81	Name			
TALAGA, FRAN				82	Street A	Address (P.O. Bo) Number is Not Acceptable)		
	ULMERTON ROAD #30			أحيا				
LAH	GO FL 33771			83				
				84	City	FL 85 Zip Code		
11 Pursuant	to the provisions of Sections 607.05	02 and 607 1508 Florida State	utes, the a	bove	e-named c	corporation submits this statement for the purpose of changing its registered		
office crr	registered agent, or both, in the State im familiar with, and accept the oblig	e cf Florida. Such change was	authorized	d by	the corpor	oration's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed naine of registered ag	AIN TO BE A STATE OF THE STATE	T - Ongiotares		l tunnatura co	required when reinstating) DATE		
12.		(NE) DIRECTORS	13,	Ayei	it signature rec	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TI	TLE		Change Addition		
NAME	TALAGA, FRAN		1.2 N	AME	j			
STREET ADDRE 3S	7500 ULMERTON ROAD #30		1.3 \$	TREE1	ADDRESS			
CITY-ST-ZIP	LARGO FL 33771		1.4 C	TY-S	T-ZIP			
TITLE	VS	☐ DELETE	2.1 Π			☐ Change ☐ Addition		
NAME	TALAGA, PAUL A		2.2 N	AME				
STREET ADDRE 3S	7500 ULMERTON RD #30		2.3 \$	TREE1	ADDRESS			
CITY-ST-ZIP	LARGO FL 33771		2.40	ITY-S	T-ZIP			
TITLE		☐ DELETE	31TI	31 TITLE		☐ Change ☐ Addition		
NAME			3.2 N	AME				
STREET ADDRESS			3.3 S	TREET	ADDRESS			
CITY-ST-ZIP			3.4. 0	3.4. CITY-ST				
TITLE		☐ DELETE	4.1 TI	4.1 TITLE		Change Addition		
NAME			4. 2 N	AME				
STREET ADDRES S			4.3 S	TREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST		T0		
TITLE		☐ DELETE	5 1 TI			Change Addition		
NAME			5.2 N					
STREET ADDRES S					ADDRESS			
CITY-ST-ZIP			5.4 C	TY-S	1-ZIP	☐ Change ☐ Addition		
TITLE		□ DELETE	0.111	I CE		[

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicate 1 on this annual 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 attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 9

NAME

STREET ADDRESS

CITY-ST-ZIP

7*27-889-8310*