## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000091709 (0)

DEVIL'S PLAY FINE ART, INC.

Principal Place of Business

Mailing Address

777 E ATLANTIC AVE STE Z-283

777 E ATLANTIC AVE STE Z-283

**FILED** Jul 31 1998 8:00am Secretary of State



DELRAY BCH FL 33483		DELRAY BCH FL 33483				DO NOT WRITE IN TH	IIC CDACE
)						3. Date Incorporated or Qualified	IIS OF ACE
						10/24/1997	
	lace of Bysiness	2a. Mailing Address				4, FEI Number	Applied For
21 25 HE 2ND AVE 26						65-0789531	Not Applicable
Suite, Apt. #, etc.   Suite, Apt. #   27			tc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	8	City & State				6. Election Campaign Financing	\$5.00 May Be
23	ELRAY BEACH	28 FL				Trust Fund Contribution	Added to Fees
Zip			Country			8. This corporation owes or has paid the o	urrent year intangible
24 004	4 4 25	29	30			Personal Property Tax due June 30.	Yes □ No
	S. Italie and Address of Current				<del></del>	10. Name and Address of New Registere	d Agent
	PORATE CREATIONS ENTERPRIS	ES INC		81  N	Vame		
4521 PGA BLVD #211 PALM BEACH GARDENS FL 33418				82 Street Address (P.O. Box Number is Not Acceptable)			
				<u> </u>			
	•		i	83			
				84 C	City		85 Zip Code
					~··· <b>y</b>	F	L   10   E.P 0000
11. Pursuant	to the provisions of sections 607,0502	and 607.1508, Florida Statut	es, the ab	ove-nar	med corpora	tion submits this statement for the purpose of	changing its registered
office or a	regist <b>ere</b> d agent, or both, in the State of am <b>familia</b> r with, and accept the obligati	it Florida. Such change was ions of, section 607.0505, Fi	authorized Iorida Stat	o by the tutes.	e corporation	n's board of directors. I hereby accept the app	contment as registered
SIGNATURE	, , , , , ,						
	Signature, typed or printed name of registered agent	and title if applicable (N	OTE Registe	red Agent	l signature require	ed when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 717	TLE			Change Addition
NAME	SHATZMAN, DAVID		1.2 NA	<b>ME</b>			
STREET ADDRESS 777 E ATLANTIC AVE STE Z-283			1.3 ST	1.3 STREET ADDRESS			
CITY-ST-ZIP	DELRAY BCH FL 33483	· · · · · · · · · · · · · · · · · · ·	1.4 CI	TY-ST-ZIP	·		
TITLE		DELETE	2.1 Til	TLE			Change Addition
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 ST	REET ADD	DRESS		
CITY-ST-ZIP			2.4 Cf	TY-ST-ZIP	·		
TITLE		DELETE	3.† TIT	3.1 TITLE			Change Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 STI	REETADD	ORESS		
CITY-ST-ZIP			3.4 CI	TY-ST-ZIP	<u>'</u>		
TITLE		DELETE	4.1 TIT	TLE			Change Addition
NAME			4.2 NA	ME	ĺ		
STREET ADDRESS			4.3 STI	REET ADD	DRESS		
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP	,		C**
TITLE		DELETE	5.1 TIT	TLE		<del>-08/03/98</del> 01092-	Change Addition
NAME			5.2 NA	ME		***150.00	~U40
STREET ADDRESS			5.3 ST	REET ADD	DRESS	***13U.UU	
CITY-ST-ZIP		<u></u> .	5.4 CI	TY-ST-ZIP			
TITLE		DELETE	6.1 TIT	TLE .			Change Addition
NAME			6.2 NA	ME			DC
STREET ADDRESS			6.3 ST	REET ADD	ORESS		12
CITY-ST-ZIP	<u> </u>			TY-ST-ZIP			7.31
14. I hereby ce	ertify that the information supplied with the	his filing does not qualify for	the exemp	otion sta	ated in section	on 119.07(3)(i), Florida Statutes. I further certif	y that the information
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 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 receipter 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 en an attachment with an address.							



Monday, July 27, 1998

Annual Reports Filings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Dear Annual Reports Filings:

I am writing to request that you accept this payment to maintain my corporation in Florida for the following reasons. This corporation was only created late last year and I have no record of receiving a first notice to file a 1998 Profit Corporation Annual Report. I have searched my files, which are orderly, but do not find any record of earlier documents. I sincerely hope you will help me in this regard as my business is very young and already struggling to maintain its presence in a growing community. I will truly appreciate any consideration you might extend.

6. That

Sincerely yours,

David S. Shatzman

25 NE 2ND AVENUE #114
DELRAY BEACH FL 33444
5 6 1 . 2 7 2 . 6 7 7 8
FAX.561.272.8369
email: devilsplay@juno.com
www.devilsplay.com