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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000097426 (5)

THE ART INSTITUTE OF MIAMI, INC.

FILED Mar 12 1998 8:00am Secretary of State

Principal Place of Business  3379 S.W. 3RD AVENUE MIAMI FL 33145  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 11/13/1997  2. Principal Place of Business 21 26 4. FEI Number CSUIte, Apt. #, etc. 22 5. Certificate of Status Desired Fee Required City & State City & State City & State Country Co	· · · · · · · · · · · · · · · · · · ·	<del></del>			· · · · · · · · · · · · · · · · · · ·		
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2. Principal Pace of Business   24. Mailing Address   3. Date incorporated or Outs'   3. Date				E			
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Solicy As Nation  City A State  City A State	<del></del>	ace of Erasmoss	}ŋ			65 079 6363 Not Applicable	
City & State  Country  City & State  Country  City & State  City & State  Country  City & State  Country  City & State  City &		W. otc.				\$8.75 Additional	
City & State 28		.,	jj				
28		J				6. Flection Campaign Financing \$5.00 May Re	
Country   Set   Country   Set   Country   Set   Country   Set   Sec   Se	23		28				
25		Country		Cour	try	8. This corporation owes or has paid the current year Intangible	
10. Name and Address of New Registered Agent   10. Name and New Registered	24	25	29	30		Personal Property Tax due June 30. X Yes No	
## STREET ADDRESS OF FOR BOX Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable)  ## Street Address (P.O. Box Number is Not Acceptable Address is registered address in the purpose of changing its registered address in the		9, Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Agent	
MAMI FL 33145    Barrier	PO	NCE DE LEON, ANA M		-  -	91 Name	ne	
## City ** FL   85   Zip Code  11. Pursuant to the provisions of Socienis 607 0542 and 607 1508, Florida Statules, the above-named corporation submits this attalement for the purpose of changing its registered agent. I am familiar with, in the State of Horida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, in the State of Horida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with, and accept the change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I all the appointment as authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I all the appointment as a decision and appointment as a decision and appointment as a decisio	337	9 S.W. 3RD AVENUE			32 Street	et Address (P.O. Box Number is Not Acceptable)	
### City ### Lab ### Zip Code  11. Pursuant to this provisions of Sections 607 0542 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with a material substitution of the purpose of changing its registered agent. I am familiar with an analysis of each of the control substitution of the purpose of changing its registered agent. I am familiar with an analysis of each of the control substitution of the purpose of changing its registered agent. In a familiar with an analysis of the corporation's board of directors. I hereby accept the appointment as registered agent to expend on the control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the changing its registered agent. In a familiar with a control of the control of	MIA	MI FL 33145		L			
Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this attatement for the purpose of changing its registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Statutes.  In a part of the provisions of Socioton 607,6505, Florida Statutes.  In a part of the provisions of Socioton 607,6505, Florida Statutes.  In a part of the purpose of the appointment as registered agent supported agent supported agent accept by the corporation's board of directors. I hereby accept the appointment as registered agent.  In a part of the purpose of				[1	93		
Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this attatement for the purpose of changing its registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Such clarage was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Horida. Statutes.  In a part of the provisions of Socioton 607,6505, Florida Statutes.  In a part of the provisions of Socioton 607,6505, Florida Statutes.  In a part of the purpose of the appointment as registered agent supported agent supported agent accept by the corporation's board of directors. I hereby accept the appointment as registered agent.  In a part of the purpose of				<u> </u>	34 City	/ RS Zin Code	
SIGNATURE   SIGN						FL     `	
12	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.						
13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	SIGNATURE						
TITLE			The second secon		Agent signatu		
NORIEGA, MARIA D   12 NAME   13 STREET ADDRESS   14 CITY - ST - 2P	<del></del>				£		
STREET ADDRESS   2101 BRICKELL AVE. #324   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	· .		_				
MIAMI FL 33129	: [					ss	
TITLE	: <b>I</b>						
NORIEGA, MARIA D   22 NAME   23 STREET ADDRESS   23 STREET ADDRESS   24 CITY-ST-ZIP   27 STREET ADDRESS   24 CITY-ST-ZIP   27 STREET ADDRESS   24 CITY-ST-ZIP   27 STREET ADDRESS   25 STREET ADDRESS   25 STREET ADDRESS   26 STREET ADDRESS   26 STREET ADDRESS   27 S			DELETE			☐ Change ☐ Addition	
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CITY-SI-ZIP   MIAMI FL 33129   2 4 CITY-SI-ZIP     ITILE	I					ss l	
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	CITY - ST - ZIP			6.4 CIT	-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 annual report or suppliemental 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 altachment with an address

DIONATURE & MANAGE

3-5-98