May 06, 1999 8:00 am Secretary of State

05-06-1999 90109 007 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000103525

1, Corporation Name

DE GRAAF CONSORTIUM FINE ART, INC.

		,						
Principal Place	of Business	Mailing Address				- A MARINAR III IBIII IBBII BBIRI BBIRI BBIRI IIIII -	Baras ikras attra	etent mer
1208 MARINE WAY, G-7 1208 MARINE WAY, G-7								
NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408								
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualifed		
					•	12/08/1997		
Principal Place of Business 2a. Mailing Address				_		4. FEI Number	Apr	plied For
26						36-3982594		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 ∧	
27						3. Common of Charles Been 52	Fee Rec	quired
City & State City & State						6. Election Campaign Financing	\$5.00	,
23						Trust Fund Contribution	Added to	o Fee <u>s</u>
Zip 24	Country Zip (25) 29 30		Country			This corporation owes the current year In Personal Property Tax.		⊠No
241	9. Name and Address of Current		<u> </u>			10. Name and Address of New Registered	Agent	
				N	ame			
MARTIN E. WASHOFSKY, E.A., P.A. 4360 NORTHLAKE BLVD			82	Si	reet Addre	ss (P.O. Box Number is Not Acceptable)		
SUITE 205				<u> </u>				
PALM BEACH GARDENS FL 33410			83				•	
I ALI	W DENOTE GATIBLE TO TE SOFTE		84	С	ity	F* 1	85 Zip C	Code
				<u> </u>		ration submits this statement for the purpose of	<u>- </u>	
office or re agent. I as SIGNATURE	egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was authorions of, Section 607.0505, Florida	Statutes	the i.	corporation	is board of directors. Thereby accept the appo	ntment as reç	gistered
	Signature, typed or printed name of registered agent		<u>-</u>	nt sigr	ature required v	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	PS IN 12
12.	PD OFFICERS ANI	DELETE	13. 1.1 TITLE		1/2	President	Change	Addition
TITLE		C. DELETE			V:	Vice-President Jona M. CATHEY 1773 Timber Cangen Drive Ada, Michigan 49361		
NAME				1.2 NAME 1.3 STREET ADDRESS		ana Timber Canaca Deliver		
STREET ADDRESS					RESS 7	de Minkinger Canyin Drive		
CITY-ST-ZIP				T-ZIP	- A	ea, meniger 79367	Change	Addition
TITLE		☐ DELETE	2.1 TITLE		Ì		CTottmide	L.J. Addison
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE					
CITY-ST-ZIP				ST-ZIF	,		☐ Change	Addition
TITLE		☐ DELETE	3.1 TITLE				Change	[] Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE		, l			
CITY-ST-ZIP				4. CITY-ST-ZIP			☐ Change	Addition
TITLE		☐ DELETE	4.1 TITLE				- Cumige	
NAME			4.2 NAME	_				
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP				CITY-ST-ZIP			☐ Change	Addition
TITLE		☐ DELETÉ	5.1 TITLE		1		□ cusuge	☐ ₩ddioon
NAME			5.2 NAME					}
STREET ADDRESS			5.3 STREE	TADE	RESS			

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 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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

Change

Addition

= ₹