PROFIT CORPORATION ANNUAL REPORT

1999

2. Principal Place of Business

KELLY, LAURIE

Suite, Apt. #, etc.

City & State

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Zip

SIGNATURE

STREET ADDRESS

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12.

TITLE

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NAME

TITLE NAME



FLORIDA DEPARIMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000035821** Corporation Name

Country

25

4058 INDIAN BAYOU DR. N. **DESTIN FL 32540**

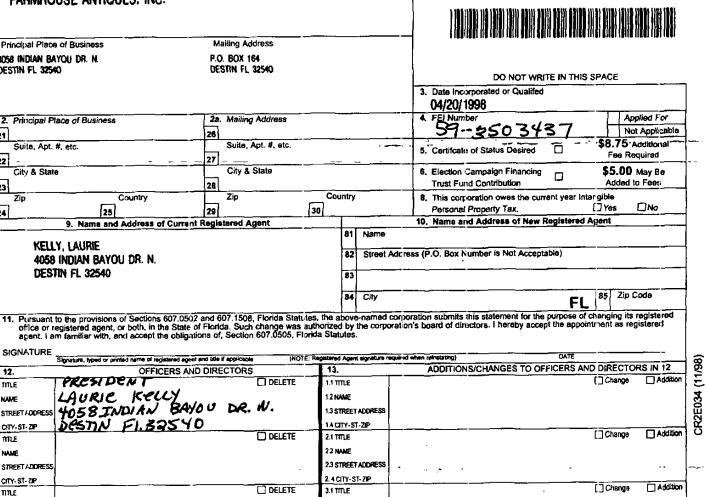
PRESI DENT

FARMHOUSE ANTIQUES, INC.

Principal Place of Business Mailing Address P.O. BOX 164 4058 INDIAN BAYOU DR. N. DESTIN FL 32540

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90054 041 ***150.00



6.4 CITY-ST-ZIP I hareby 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 a Lother like empowered.

3.2 NAME

4.2 NAME

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

3.3 STREET ADDRESS 3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY- ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

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