PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90178 010 \*\*\*150.00

## DOCUMENT # P98000073549

1. Corporation Name

UNIVERSAL ART, INC.

	, and the same of			
Principal Place	of Business	Mailing Address		T 1007/1007 118 19191 IBITE BOLL BOLL BOLL BOLL SOUR DELL SEGUE BELL BELL BELL BELL BELL BELL BELL BE
8200 SW 133 STREET 8200 SW 133 STREET				
MIAMI FL 33156 MIAMI FL 33156				
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed 08/20/1998
Principal Place of Business     2a. Mailing Address		00 1.00	4. FEI Number 0859268 Applied For Not Applicable	
			89 AVE	
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.		5. Certificate of Status Desired
		City & State		6. Election Campaign Financing \$5.00 May Be
		28 MIAMI F	2	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 33/76 30	1 US	Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	<u> </u>		10. Name and Address of New Registered Agent
			81 Name	
SHISH, ITZCHAK				Address (D.O. Roy Number in Not Acceptable)
8200 SW 133 STREET			82 Street 129	Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33156			83	
			100	Oct 7in Code
			84 City	11AM1 FL 85 Zip Code 33176
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	the shove-named	comporation submits this statement for the purpose of Changing its registered
office or re	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was auth tions of, Section 607,0505, Florid	nonzed by the corpo la Statutes.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	* // TTY/HAL	ZHTSH	procider	t × 2-8-94
	Signature typed or printed name of registered agen-	t and title if applicable (NOTE: Ro	egistered Agent signature r	required when reinstating)
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SAGI, CHAVA		1.2 NAME	
STREET ADDRESS	C/O 8200 SW 133 STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33156		1.4 CITY-ST-ZIP	
TITLE	PS	☐ DELETÉ	2.1 TITLE	Change Addition
NAME	SHISH, ITZCHAK		2.2 NAME	SHISM, LIZCHMIK
STREET ADDRESS	8200 SW 133 STREET		2.3 STREET ADDRESS	SHISH, ITZCHAK 12950 SW 89 AVE MIAMI FL 33176
CITY-ST-ZIP	MIAMI FL 33156		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	·
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
C/TY-ST-Z/P			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	Ghange · Addition
1			5.2 NAME	I was a second of the second o

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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

JIZZHAK SHISH

DELETE

president

2-8-99

305-3781444 Daytime Phone #

Addition

Change

CRZE034 (11/98)