04-27-1999 90029 021 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



1999

CUMENT # P98000092635

THE INTERNATIONAL ARTIST, INC.

Principal Place of Business	Mailing Address	
925 CHINABERRY COURT NEW SMYRNA BEACH FL 32168	925 CHINABERRY COURT NEW SMYRNA BEACH FL (2168	



DO NOT WRITE IN THIS SPACE

						DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualifed		
								11/02/1998		
2.	Principal	Place of Business	2a	. Mailing Address				4. FEI Number Applied For		
21	,		26					59 - 35 4 / 11 3 Not Applicate	le	
	Suite, Ap . #, etc.			Suite, Apt. #, etc.				\$8.75 Ad ditional	\$8.75 Additional Fee Required	
22	City & Sta	alte	27	City & State				6. Election Campaign Financing Trust Ft nd Contribution \$5.00 May Be Added to Fees	_	
23	71	County	28	Zip	Cou	ntry			_	
24	Zip	Country 25	29	ا ا	30	iti y		8. This corporation owes the current year Ir tangible Personal Property Tax.		
		9. Name and Address of Curr	ent Regi	it Registered Agent		10. Name and Address of New Registered Agent				
AMERILAWYER 343 ALMERIA AVENUE					81 82	Name Street Add r	ress (P.O. Box Number is Not Acceptable)			
	CO	RAL GABLES FL 33134				83				
						84	City	FL 85 Zip Code		
11	Pursuar	nt to the provisions of Sections 607.0	502 and (307.1508, Florida Stat	tutes, the at	by bove	e-named corporate	poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered	i	

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo ida Statutes.

SIGNATURE.		7,075				DATE		
	Signature, typed or printed nam a of registered agent a id title if applicable.	gistered Agent signature re		IS ALLENDED TO	D DISECTOR	2 IN 42		
12.	OFFICERS AND DIRECTORS		13.	ADDITIO	NS/CHANGES TO	OFFICERS AN		
TITLE	PTD	☐ DELETE	1,1 TITLE				Change	Addition
NAME	CLARK, DOROTHY D		1.2 NAME					
STREET ADDRES 3	925 CHINABERRY COURT		1.3 STREET ADDRESS					
CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		14 CITY-ST-ZIP					
TITLE	SVD	DELETE	2.1 TITLE				Change	Addition
NAME	CLARK, ROBERT V/		2.2 NAME					
STREET ADDRES 3	925 CHINABERRY COURT		2.3 STREET ADDRESS					}
CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		2. 4 CITY-ST-ZIP					
TITLE		☐ DELETE	3 1 TITLE			1	☐ Change	Addition
NAME			3.2 NAME					
STREET ADDRES 3	1		3.3 STREET ADDRESS					Ì
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4.2 NAME					
STREET ADDRES 3			4.3 STREET ADDRESS					
CITY-ST-ZIP			4 4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRES 3			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					
ET ADDRES 3			6.3 STREET ADDRESS					(
ST-ZIP			6.4 CITY-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 or riffy that the information indicated on this annual report or supplemental a nual 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 off an attachment with an address, with all other like empowered.

SIGNATURE:

AFRIL 23,1999 (904) 427-0598

CR2E034 (11/98)