2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 10, 2006 8:00 am Secretary of State DOCUMENT # P99000073823 03-30-2006 90035 032 ***150.00 1. Entity Name FRANK HILL ARTWORKS, INC. Principal Place of Business Mailing Address 3056 S SR7 BAY 78 MIRAMAR FL 33023 1118 NE 18TH AVE FORT LAUDERDALE FL 33304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State City & State 4. FEI Number Applied For 65-0949776 Not Applicable Zio Zio Соиптлу Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GILBERT, LUTHER W Street Address (P.O. Box Number is Not Acceptable) 3056 S SR7 BAY 78 MIRAMAR FL 33023 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE .. (NOTE: Registered Agent prinature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2006 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 TITLE The Colore TITLE ☐ Change Addition NAME GILBERT, LUTHER W NAME 1118 NE 18TH AVE STREET ADORESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33304 CITY-ST-ZIP MILE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. ____Cotote.__ TITLE Change ___ [Addition NUME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-SI-ZIP nne Detete TITLE ☐ Change ■ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIIE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP MLE Delete MLE □ Change ☐ Addition NAME NAME

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I hereby cartify that the information supplied with this titing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-SE-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: LUTHER