

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
John B. Matheson
Governor, Florida
Tallahassee, Florida 32399-0001

APPROVED
AND
FILED

SEPT 12 AM 10:15

DOCUMENT # **S04591** (1)

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

SCANDINAVIAN ARTISTIC DESIGN, INC.

3321 E OAKLAND PK BLVD
SUITE 129
FT LAUDERDALE FL 33308

3321 E OAKLAND PK BLVD
SUITE 129
FT LAUDERDALE FL 33308

3. Date of Incorporation
10/03/1990

3a. Date of Last Report
04/29/1994

2. Principal Office Location
21. Date of Report
22. Fiscal Year
23. State of Incorporation

2a. Principal Office Location
26. Date of Report
27. Fiscal Year
28. State of Incorporation

4. FE Number
65-0219807

Applied Fee
Not Applicable

5. Certificate of Status Issued

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Report Filed Contribution

\$5.00 May Be
Added to Fees

8. Does corporation have liability for obligations for income tax purposes?
None Indicated

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONTENTO, ROBERT J. CPA
3410 GALT OCEAN DR
#1409
FT LAUDERDALE FL 33308

81. Name

82. Street Address, P.O. Box, Apartment, R.F.D. or other

83.

84. City

FL

85. Zip Code

11. I, the undersigned, the president or other officer or director of the corporation, do hereby certify that the above information is true and correct to the best of my knowledge and belief, and that the corporation is in compliance with the provisions of the Florida Statutes relating to the filing of this report and the payment of the required fees. I am duly qualified to sign this report and to make this certification.

Signature

12. Name and Address of Registered Agent

P
CONTENTO, EJA I.
3410 GALT OCEAN DR #1409
FT LAUDERDALE FL
ST
CONTENTO, ROBERT J.
3410 GALT OCEAN DR #1409
FT LAUDERDALE FL

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

13. Additional Names of Officers, Directors, and Shareholders

NAME ADDRESS CITY STATE ZIP

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

NAME

Address

City

State

Zip

SIGNATURE: *Eja I Contento* Eja I Contento president 5/16/95

