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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S04591 (1)

FILED Apr 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 3321 E OAKLAND PK BLVD SUITE 129 FT LAUDERDALE FL 33308 SCANDINAVIAN ARTISTIC DESIGN, INC. Mailing Address 3321 E OAKLAND PK BLVD SUITE 129 FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308					DO NOT WRITE IN THIS SPACE	
FT LAUDERD	ALE FL 33308	FI CAUDEHDAL	E FL 33306		3. Date Incorporated or Qualified 10/03/1990	SPACE
2. Principal Place of Business 2a. Ma 21 26			, Mailing Address		4. FEI Number 65-02 19807	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	de	City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	7ip 29	30	untry	This corporation owes or has paid the corporate Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cui	rrent Registered Agent		81 Name	10. Name and Address of New Registered	J Agent
3410 GALT OCEAN DR #1409 FT LAUDERDALE FL 33308				82 Street Add 83 84 City	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
11. Pursuant office or agent. I a	to the provisions of Sections 607, registered agent, or both, in the S am familiar with, and accept the of	0502 and 607.1508, Flori late of Florida, Such char bligations of, Section 607	da Statutes, the a ige was authoriz 0505, Florida Sta	above-named corped by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	
OFGRATORE	Signature, typed or printed name of registeres	d agent and title ill applicable	(NOTE Register	ed Agent signature requ		
12.	OFFICERS	AND DIRECTORS	13		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE NAME STREET ADDRESS	P CONTENTO, EIJA I. 3410 GALT OCEAN DR #' FT LAUDERDALE FL	□ Di 1409	1.21	TITLE NAME STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	ST CONTENTO, ROBERT J. 3410 GALT OCEAN DR #	1409	2.1 2.2	CITY-ST-ZIP TITLE NAME STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE	FT LAUDERDALE FL	D		CITY-ST-ZIP		Change Addition
NAME STREET ADDRESS			3.2	NAME STREET ADDRESS		
CITY-ST-ZIP TITLE NAME		<u> </u>	ELETE 4.1	CITY-ST-ZIP TITLE NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			4.3	STREET ADDRESS CITY-ST-ZIP		
TITLE	 	Пр		TITLE		Change Addition

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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Contento 1/4/98

DELETE

Addition

Change