

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Myrland
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S14738** (6)

1. Corporation Name

WALLPAPER SHACK, INC.



Principal Place of Business

**1431 CYPRESS DR.
JUPITER FL 33469**

Mailing Address

**1431 CYPRESS DR.
JUPITER FL 33469**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ACKERMAN, THELMA
1431 CYPRESS DR.
JUPITER FL 33469**

3. Date Incorporated or Qualified

11/19/1990

3a. Date of Last Report

01/18/1995

4. FET Number

65-0228191

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

JOANN VANASSE

82

Street Address (P.O. Box Number is Not Acceptable)

13257 TOUCHSTONE PLACE

83

84

City

PAUM BEACH GARDENS FL

85

Zip Code

33418

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Joann Vanasse **Pr.**

DATE

1/24/96

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	ACKERMAN, THELMA	
STREET ADDRESS	13257 TOUCHSTONE PLACE	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	D	☒ DELETE
NAME	VANASSE, JOANN	
STREET ADDRESS	13257 TOUCHSTONE PLACE	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	

**5000017304015
-03/04/96--01034--013
***200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE

Joann Vanasse **Pr.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/96

DATE

407

744-0024

DISPATCH NUMBER

CR2E034 (12/95)