FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** May 12 1998 8:00am ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name CARRENO ART & FRAME INC. Principal Place of Business Mailing Address 40 E. OAKLAND PK. BLVD. 40 E. OAKLAND PK. BLVD. **SUITE 206** SUITE 208 DO NOT WRITE IN THIS SPACE WILTON MANORS FL 33334 WILTON MANORS FL 33334 3. Date Incorporated or Qualified 12/10/1990 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 65-0230622 21 Not Applicable 26 Suite, Apt. #, etc Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes □ Ño 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CARRENO, LOUIS A. Name 4404 N.W. 92ND WAY Street Address (P.O. Box Number is Not Acceptable) BLDG. #22 APT.#7 SUNRISE Ft. 33351 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTF: Angistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE CARRENO, LOUIS A. NAME 1.2 NAME 4404 N.W. 92ND WAY BLDG. #22 APT.#7 STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADORESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 34. CITY-ST-ZIP CITY - ST - ZIP Change DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 certify that the information indicated on this annual report or supplementation 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 project or trusted empoyered 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 or application or the project of the corporation of the corporatio

SIGNATURE: