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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

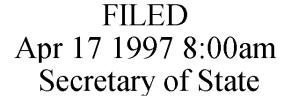
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # S45191

(1)

PORCELAIN STUDIO, INC.





Principal Place of Business Mailing Address									IBN BIBN 1901
2859 LEXINGTON STREET 2859 LEXINGTON STREET SARASOTA FL 34231 SARASOTA FL 34231-6115									
						3. Date Incorporated or Qualified 04/15/1991		te of Las 11/199	t Report S
2. Principal P	28. Mailing Address	ling Address			4. FEI Number			Applied For	
21	26	Ant # oto			65-0289199		60.7	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Stiffe, Apr. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		Add	ed to Fees
Zip			F1			8. This corporation has liability for i	for intangible tax under s. 199.032, KYes No		
24	25 29 30 9. Name and Address of Current Registered Agent		[30]		Florida Statutes L Yes L J No 10. Name and Address of New Registered Agent				
LIAN		ent negistaten Agent		81 1	Name	10. Name and radies of New York	JIGIOI DU P	- Igoin	
HANSEN, DANIEL P 245 N TAMIAMI TRAIL			-	82 5	Ctract Addres	Idress (P.O. Box Number is Not Acceptable)			
SUITE E					Street Addres	Address (P.O. Box Number is Not Acceptable)			
VEN	ICE FL 34285		63						
			Ī	84 (City		FL	85 Z	ip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607,1508, Florida Statut	es, the ab	ove-n	amed corpo	ration submits this statement for the p	urnose of	<u></u> changin	g its registered
office or r	egistered agent, or both, in the Stam familiar with, and accopt the ob-	ite of Florida. Such change was :	authorized	l by th	ie corporatio	n's board of directors. I hereby accep	t the app	ointment	as registered
SIGNATURE		9							
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent sign					signature required		DATE	DIDECT	000 111 10
12.	PD • OFFICERS A	ND DIRECTORS	13. 111111		T	ADDITIONS/CHANGES TO OFFIC	ERS AND	Chang	
TITLE NAME	JOHN C W			1.2 NAME					,
STREET ADDRESS	2859 LEXINGTON ST		13 STREET ADDRESS		IDRESS				
CITY-ST-ZIP	SARASOTA FL		14 CITY-S1-ZIP		i				
TITLE			211111					Chang	je 🔲 Addition
NAME	2		22 NAI	ME					
STREET ADDRESS			2 3 STREET AUDRESS		DRESS				
CITY-ST-ZIP			2 4 CITY-ST-ZIP		ZIP				
TITLE		☐ DELETE	3 1 TITLE					Chang	je ∐_Addition
NAME			32 NAME						
STREET ADDRESS			33 STF		1				
CITY-ST-ZIP	DELETE			[Y-S]	ZIP			Chang	ne Addition
TITLE NAME	L Dt		4.1 TBLE 4. 2 NAME					الهاان رے	JO L. AUGILION
STREET ADDRESS	-			KEFT AD	IDRESS				
CITY-ST-ZIP			•	Y-S1-2					
TITLE		☐ DELETE	5.1 TITI					Chang	je 🔲 Addition
NAME			5.2 NA	5.2 NAME					
STREET ADDRESS			5 3 S1F	REET AD	DRESS				
CITY-ST-ZIP			5.4 CIT	Y-SI-Z	ZIP	/			
TITLE		DELFTE 61		LF				Chan	ge 🗌 Addition
NAME			6.2 NAM	ME	ŀ				
STREET ADDRESS			6.3 \$18	REET AD	DRESS				
CITY-ST-ZIP		English Alice Filter Decree		Y-S1-2		o Section 119 07/3/(i) Florida Statutes	. I fueth as	onrtif 41	on the

recombined setting the meaning supplied with this timing does not quality for the exemption stated in Section 118.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is frue and accurate and that my signature shall have the same logal effect as if made under eath; 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 application with an address.