

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

NON-PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 22, 1999 8:00 am  
Secretary of State

02-22-1999 90100 046 \*\*\*150.00

DOCUMENT # S49110

1. Corporation Name  
MASTERWORKS DESIGN, INC.

Principal Place of Business  
1780 TAYLOR AVE.  
WINTER PARK FL 32789

Mailing Address  
1780 TAYLOR AVE.  
WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1991

4. FEI Number  
59-3066479

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 owes the current year intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 1710 Lorena Lane  
Suite, Apt. #, etc.

2a. Mailing Address

26 1710 Lorena Lane  
Suite, Apt. #, etc.

22 City & State

23 Orlando, FL

24 Zip 32806

25 Country USA

27 City & State

28 Orlando, FL

29 Zip 32806

30 Country USA

9. Name and Address of Current Registered Agent

MERKEL, MATTHEW  
1780 TAYLOR AVE  
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name

Merkel, Matthew

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

1710 Lorena Lane

83

84 City

Orlando

85 FL

Zip Code  
32806

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
MERKEL, MATTHEW  
STREET ADDRESS  
1780 TAYLOR AVE.  
CITY-ST-ZIP  
WINTER PARK FL 32789

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
Merkel, Matthew  
1.3 STREET ADDRESS  
1710 Lorena Lane  
1.4 CITY-ST-ZIP  
Orlando, FL 32806

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Matthew Merkel

Jan. 6, 1999 (407) 894-

Date

Daytime Phone #

CR2E034 (11/98)