1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S99417**

ARNART INTERNATIONAL, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

382 LAKESIDE BLVD **BOCA RATON FL 33434** 

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382 LAKESIDE BLVD BOCA RATON FL 33434

2a. Mailing Address

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## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90218 033 \*\*\*150.00



Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

12/11/1991 4. FEI Number

65-0303928

Table 1	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1. 1		dditional
28	22		27			5. Certificate of Outros Doubles	ш . 	Fee Rec	quired
20   Country   Zip   Country   Zip   Country   S. Trust Fund Contribution   Added to Fees   Zip   Country   S. Trust Fund Contribution   Added to Fees   No   S. Name and Address of Current Registered Agent   S. Name and Address of Current Registered Agent   S. Name and Address of New Registered Agent   S. Name   S. Nam	City & State	City & State City & State				6. Election Campaign Financing	\$5.		May Be
Zip   Country   Zip   Country   Zip   Country   B. This corporation ower the current year inlangible   Personal Property Tax.   Yes   No.	23		28			Trust Fund Contribution	<u> </u>	Added to	Fees
9, Name and Address of Current Registered Agent  TAMCHIN, BARBARA 382 LAKESIDE BLVD BOCA RATON FL 33434  ### City		Country	Zip	Country	,	8. This corporation owes the curre	ent year Intangib	le	}
10. Name and Address of Current Registered Agent  TAMCHIN, BARBARA 382 LAKESIDE BLVD BOCA RATION FL 33434  81	24 25 29 30					Personal Property Tax.		'es	□No
TAMCHIN, BARBARA 382 LAKESIDE BLVD BOCA RATON FL 33434  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0592 and 607 1508, Florida Statutes, the aboven-armed corporation submits this statement for the purpose of changing its registered agent, an advanced by the carbon of the purpose of changing its registered agent. I am familier with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signifum, host or protect name of registered agent and the familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TAMCHIN, LEONARD 12. TAMCHIN, LEONARD 13. STREET ADDRESS 12. AMBERT ADDRESS 12. AMBERT ADDRESS 12. AMBERT ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. TITLE 15. TAMCHIN, LEONARD 15. STREET ADDRESS 15.		9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Ager	it	
382 LAKESIDE BLVD BOCA RATON FL 33434    B1				81	Name				
BOCA RATON FL 33434  83  64 City FL 85 Zip Code  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  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TAMCHIN, LEONARD  12. ANNE  TAMCHIN, LEONARD  13. STREET ADDRESS  TAMCHIN, LEONARD  13. STREET ADDRESS  TAMCHIN, LEONARD  14. ACTIV-51-22P  TITLE  DIAMCHIN, LEONARD  22. NAME  33. STREET ADDRESS  CITY-51-22P  BOCA RATON FL  DELETE  13. TITLE  Change Addition  NAME  STREET ADDRESS  CITY-51-2P  TITLE  Change Addition	382 LAKESIDE BLVD				Street Address (D.O. Boy Number is Not Accentable)				
11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 reame of registered agent and the if applicable. (NOTE: Registered Agent signature required when relitating)   DATE     12.					51 Street Address (F.O. Box Mailiber is Not Acceptable)				
11. Pursuant to the provisions of Sections 507 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11. TAMICHIN, LEONARD 15. STREET ADDRESS 14. STREET ADDRESS 15. STREET ADDRESS 1					83				
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Signature, hyped or printed rame of registered agent and the if applicable. (NOTE: Registered Agent and Agent and precise depend and the if applicable. (NOTE: Registered Agent applicable.)  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PTS TAMCHIN, LEONARD  382 LAKESIDE BLVD  382 LAKESIDE BLVD  1.3 STREET ADDRESS  STREET ADDRESS  BOCA RATON FL  1.4 CITY-ST-ZP  1.7 TITLE  D TAMCHIN, LEONARD  382 LAKESIDE BLVD  2.2 STREET ADDRESS  S	office or re	egistered agent, or both, in the State of	Florida. Such change was au	thorized by	the corporation	on's board of directors. I hereby accep	the appointme	nt as reg	istered
12.	SIGNATURE					,	DATE		
TITLE PTS			<u>'i</u>		nt signature required			PECTO	28 INI 12
TAMCHIN, LEONARD  TAMCHIN, LEONARD  TAMCHIN, LEONARD  TAMCHIN, LEONARD  TITLE  D  CITY-ST-ZIP  TAMCHIN, LEONARD  STREET ADDRESS  ASZ LAKESIDE BLVD  CITY-ST-ZIP  TITLE  D CLETE  TAMCHIN, LEONARD  STREET ADDRESS  BOCA RATON FL  TITLE  CITY-ST-ZIP  BOCA RATON FL  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  ATTITLE  ASTREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  ASTREET ADDRESS  CITY-ST-ZIP  TITLE  ASTREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  ASTREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  STREET ADDRESS  CITY-ST-ZIP  TITLE  STREET AD				_		ADDITIONS/CHANGES TO OFF			
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TITLE	STREET ADDRESS	382 LAKESIDE BLVD		2.3 STREE	T ADDRESS	- <b>-</b>			
NAME	CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY-5	ST-ZIP				
STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP	TITLE	,	☐ DELETE	3.1 TITLE				Change	Addition {
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TITLE	STREET ADDRESS			3.3 STREE	TADORESS				
TITLE	CITY-ST-ZIP			3.4. CITY-5	ST-ZIP				
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	•				1				
	CITY-ST-ZIP	portify that the information supplied with	this filing does not qualify for			Section 119 07(3)(i) Florida Statutes I	further certify th	at the in	formation

indicated on this armular report or supplemental annual report is the core of 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 the empowered.