200	MILOKW ROSI	NESS REPO	RI (ARK)	_	1000	
DOCU	MENT # V3100	1					
BERGHOFF PICTURE FRAMING INC.					FILED		
Principal Place of Business Mailing Address						01 OCT -2 PM 2: 15	
C/O PISANO -225 Main Sti Safety Hare	REET 935 MAIN St A-3	C/O PISANO ACCOUNTING -005 MAIN ST. STE-B-935 MAIN STAB SAFETY HARBOR FL 34695 US -				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal F	Place of Business	3. Mailing Address			-	† 1881) 817888 77787 77811 89117 89187 7781 81811 87811 81817 7 7811 81817 81811 81817 1881	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE	
City & Stat	te	City & State			4 . F	FEI Number 59-3119857 Applied For Not Applicable	
Zip Country		Zip Country			5. (Certificate of Status Desired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name			
PISANO, S 935 MAIN	SANDRA M. ST	Street Address (P.O. Box Number is Not Acceptable)		
STE A-3	HARBOR FL 34695	City				Tip Code	
City The above named entity submits this statement for the purpose of changing its registered office or registered.					ed ag	FL Zip Code	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applica				\$550.00 will be \$750.	00	reinstating) DATE 10. Election Campaign Financing Trust Fund Contribution. DATE \$5.00 May Be Added to Fees	
11.	OFFICERS AND D		12.			DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BERGHOFF, PHILIP 3126 BORDEAUX LANE str		TITLE NAME STREET AI CITY-ST-		200004641872		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET AI CITY-ST-	1		☐ Change ☐ Addition	
indicated of the cor	l on this report or supplemental report is t	rue and accurate and that m vered to execute this report a	v signature	shall have the s	same I	119.07(3)(i), Florida Statutes. I further certify that the information legal effect as if made under oath; that I am an officer or director rida Statutes; and that my name appears in Block 11 or Block 12 if	

813-854-2532

2062

SEPTEMBER 28,2001

FLORIDA DEPARTMENT OF STAE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

SIRS:

PLEASE ACCEPT THIS CHECK FOR THE RENEWAL OFFOUR CORPORATION. THE REASON IS DUE TO THE FACT OUR REGEISTER AGENT HAS MOVED OFFICES THREE(3) TIMES IN NINE(9) YEARS. THE ADDRESS OUR REPORT WAS MAILED TO (SEE ATTACHED) 685 MAIN STREET, WAS CHANGED IN AUGUST OF 1999.

THE POST OFFICE WILL NO LONGER FORWARD MAIL ADDRESSED THERE.

THE ONLY REASON WE FINALLY DID RECEIVE THE REPORT WAS THE AGENTS POSTMAN SAW IT AND WAS KIND ENOUGH TO FORWARD IT. IT WAS THEN WE REALIZED THE PROBLEM.

WE DO APOLOGIZE FOR THE CONFUSION AND RESPECTFULLY REQUEST YOU ACCEPT OUR PAYMENT AND WAIVE PENALTIES.

VERY TRULY YOURS,

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