

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90011 011 ***150.00

DOCUMENT # **V42017** ✓

Corporation Name

ANOTHER CANVAS SHOP INC.



Principal Place of Business

1 NE 25TH ST
POMPANO BEACH FL 33064

Mailing Address

451 NE 25TH ST
POMPANO BEACH FL 33064
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1992

Principal Place of Business

2a. Mailing Address

26

4. FEI Number

65-0346055

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

27

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

28

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

25

Zip

Country

29

30

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ADAMS, TODD
1531 NE 32 PL
POMPANO BCH FL 33064

81 Name

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

83

84 City

FL

85 Zip Code

1. 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

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

LE P ☐ DELETE
ME ADAMS, TODD
REET ADDRESS 1531 NE 32 PL
Y-ST-ZIP POMPANO BCH FL

1.1 TITLE

☐ Change ☐ Addition

LE VP ☐ DELETE
ME SHORTES, SHANE
REET ADDRESS 801 NE 8TH STREET 210 NE 10th St.
Y-ST-ZIP POMPANO BCH FL Delray Bch. FL 33449

2.1 TITLE

☐ Change ☐ Addition

LE ☐ DELETE
ME
REET ADDRESS
Y-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

LE ☐ DELETE
ME
REET ADDRESS
Y-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

LE ☐ DELETE
ME
REET ADDRESS
Y-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

LE ☐ DELETE
ME
REET ADDRESS
Y-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/99

954-949-7988

CR2E034 (5/99)

V42017
587233-90011-11

7/7/99

Please note:

We never received the
first corp. package, please
accept the check enclosed,
and have a nice day.

Thank You,

Shane Shint V.P.