
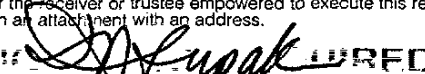


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # V52701 (2) 1. Corporation Name ART HEADQUARTERS, INC.					
Principal Place of Business 11885 44TH ST. NO. CLEARWATER FL 34622 US			Mailing Address 11885 44TH ST. NO. CLEARWATER FL 34622 US		
2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 07/17/1992	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		4. FEI Number 59-3132444 Applied For Not Applicable	
City & State 23		City & State 28		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip 24		Country 25		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent SUPAK, JON 11885 44TH ST. NO. CLEARWATER FL 34622		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS					
TITLE	P	<input checked="" type="checkbox"/> DELETE			
NAME	BOROM, CHARLES				
STREET ADDRESS	6106 SISTER ELSIE DR.				
CITY - ST - ZIP	TUJUNGA CA				
TITLE	S	<input checked="" type="checkbox"/> DELETE			
NAME	BOROM, LANNA				
STREET ADDRESS	6106 SISTER ELSIE DR.				
CITY - ST - ZIP	TUJUNGA CA				
TITLE	V	<input type="checkbox"/> DELETE			
NAME	REGAN, DAVID				
STREET ADDRESS	1736 THURBER				
CITY - ST - ZIP	BURBANK CA 91501				
TITLE	T	<input type="checkbox"/> DELETE			
NAME	SUPAK, JON				
STREET ADDRESS	322 HILLTOP LANE				
CITY - ST - ZIP	CLEARWATER FL				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP					
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
3.2 NAME	V/S				
3.3 STREET ADDRESS	1175 JACKSON DR.				
3.4 CITY - ST - ZIP	CLEARWATER FL				
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
4.2 NAME	P/T				
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
SIGNATURE:  J. SUPAK					

CR2E034 (10/97)