


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 28, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000088150**

1. Entity Name  
**ART & SCULPTURE UNLIMITED, INC.**



Principal Place of Business  
**7661 N.W. 68TH ST.  
 BAY NO. 103  
 MIAMI, FL 33166**

Mailing Address  
**7661 N.W. 68TH ST.  
 BAY NO. 103  
 MIAMI, FL 33166**



03202006 No Chg-P CR2ED34 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **56-2391102** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**VALDES, LAZARO  
 3420 S.W. 104 AVE  
 MIAMI, FL 33165**

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALDES, LAZARO 3420 SW 104 AVE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VALDES, IGNACIO M 7996 GRAND CANAL DRIVE MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEREIRO, NEYDA M 7996 GRAND CANAL DRIVE MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VALDES, JUANA M 7996 GRAND CANAL DRIVE MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000463160  
 04/11/06-80103-025 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAZARO VALDES Date: 03/19/06 (305) 807 6107

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #