## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000052025

Entity Name: ARTISTIC BRICK, CO.

Address:

City-St-Zip:

4427 KIRKMAN RD #103

ORLANDO, FL 32811

FILED Apr 30, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1016 SWEETBROOK WAY ORLANDO, FL 32828 US **Current Mailing Address: New Mailing Address:** 1016 SWEETBROOK WAY ORLANDO, FL 32828 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHOCKMEDIA CORPORATION FABIAN QUEIROZ 1650 SAND LAKE RD 1016 SWEETBROOK WAY ORLANDO, FL 32828 ORLANDO, FL 32809 US 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. SIGNATURE: FABIAN QURIROZ 04/30/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition QUEIROZ, FABIAN Name: Name: 1016 SWEETBROOK WAY Address: Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: PIEHOWIAK, DETLEV Name: 1016 SWEETBROOK WAY Address: Address: ORLANDO, FL 32828 US City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition JUSTINO, SIDNEY Name: Name: 1016 SWEETBROOK WAY Address: Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition DO NASCIMENTO, GERALDO R Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: FABIAN QUEIROZ **PRES** 04/30/2007