2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073229

FILED Jul 26, 2005 Secretary of State

Entity Nan	ne: ARTISTR`	Y PHOTOGRAPHIC SERVICES	S, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	NER BOULEV ILL, FL 34609	ARD					
Current M	ailing Addres	s:	New Maili	New Mailing Address:			
	NER BOULEV ILL, FL 34609	ARD					
FEI Number:	59-3592912	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:		
7088 MARI	N, MICHAEL NER BOULEV ILL, FL 34609	ARD US	7088 MARI	SBANI, TERRY M 7088 MARINER BOULEVARD SPRING HILL, FL 34609 US			
The above in the State		ubmits this statement for the pu	rpose of changing i	s registered	office or registered agent, or bo	oth,	
SIGNATUR	RE: TERRY M	. SBANI		07/26/2005			
	Electron	c Signature of Registered Ager	nt		Date	_	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notic	е.			
OFFICERS	S AND DIRECT	rors:	ADDITION	S/CHANGE	S TO OFFICERS AND DIREC	TORS:	
Title: Name: Address: City-St-Zip:	D () SBANI, THOMAS 8148 CAMERON NEW PORT RIC	I CAY COURT	Title: Name: Address: City-St-Zip:	1	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D (X) WILKINSON, MI 6527 BARCELO BROOKSVILLE,	NA BLVD.	Title: Name: Address: City-St-Zip:	,	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPD () SBANI, TERRY 6336 ROWAN R NEW PORT RIC		Title: Name: Address: City-St-Zip:	VPD SBANI, TERF 7317 MILLST SPRING HILL	ONE ST.		
Title: Name: Address: City-St-Zip:	S () SBANI, DESIRE 6336 ROWAN R NEW PORT RIC	D.	Title: Name: Address: City-St-Zip:	S SBANI, DESI 7317 MILLST SPRING HILL	ONE ST.		
Title: Name: Address: City-St-Zip:	T () SBANI, JEAN M 6336 ROWAN R NEW PORT RIC		Title: Name: Address: City-St-Zip:	SBANI, JEAN 8148 CAMER			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: TERRY M. SBANI VPD 07/26/2005