

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113138

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: NOTHING BUT ART, INC.

## Current Principal Place of Business:

1525 SOUTH SHADE  
SARASOTA, FL 34239

## New Principal Place of Business:

4232 CHARING CROSS ROAD  
SARASOTA, FL 34241

## Current Mailing Address:

1525 SOUTH SHADE AVE  
SARASOTA, FL 34239

## New Mailing Address:

4232 CHARING CROSS ROAD  
SARASOTA, FL 34241

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYES, LEON  
1525 SOUTH SHADE AVE  
SARASOTA, FL 34239 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P                      ( ) Delete  
Name: REYES, MARCOS F  
Address: 1525 SOUTH SHADE AVE  
City-St-Zip: SARASOTA, FL 34239

Title:                      ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P                      ( ) Change (X) Addition  
Name: NICHOLS, KIMBERLY C  
Address: 4232 CHARING CROSS ROAD  
City-St-Zip: SARASOTA, FL 34241 US

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: KIMBERLY NICHOLS

P

03/08/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date