

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J02786

FILED
Jul 17, 2006
Secretary of State

Entity Name: ARTEMIS ENTERPRISES, INC.

Current Principal Place of Business:

C/O SHEPARD KING
1221 BRICKELL AVE 21ST FL
MIAMI, FL 33131

New Principal Place of Business:

C/O PATRICIA JONES
1221 BRICKELL AVE 21ST FL
MIAMI, FL 33131

Current Mailing Address:

C/O PATRICIA JONES
1221 BRICKELL AVE 21ST FL
MIAMI, FL 33131

New Mailing Address:

FEI Number: 59-2656776 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: CAMPOLLO, RAMON
Address: C/O 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: DAS () Delete
Name: CAMPOLLO DE BONIFASI, MARIA E
Address: 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: DV () Delete
Name: CAMPOLLO DE GARCIA, ROSA MARIA
Address: C/O 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROSA MARIA CAMPOLLO DE GARCIA

D

07/17/2006

Electronic Signature of Signing Officer or Director

_____ Date