## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J02786  1. Entity Name ARTEMIS ENTERPRISES, INC.								FIL				
					CO WE			2008 FEB 29	PM 3:	11		
Principal Plac C/O PATRICI/ 1221 BRICKI MIAMI, FL 3	A JONES ELL AVE 21S		Mailing Address C/O PATRICIA JONES 1221 BRICKELL AVE 21ST FL MIAMI, FL 33131			T)	SECRETARY ALLAHASSE			I <b>T 1</b> 1 41 3 <b>4 1</b> 1:		
7315 S	.W. 87	oess · No P.O. Box # 7th Ave.	3. Mailing Address c/o Anthony Wolpert									
Suite, Apt. #, etc. Suite 200			Suite, Apt. #, etc. 7315 S.W. 87th Ave.				02182008	Chg-P	CR2E034	(12/06)		
City & State Miami, FL			City & State Suite 200, Miami, FL				4. FEI Numb				plied For	
Zip	12	Country	Zip Country			-	59-265		<u>\$</u>	8.75 Add	t Applicable	
33173	USA Seed Address of Courset I				USA	Certificate of Status Desire     Name and Address of No.			Fee Required			
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name						
CORPDIRECT AGENTS 515 E. PARK AVE. TALLAHASSEE, FL 32301					Street Address (P.O. Box Number is Not Acceptable)							
TAED III IOOEE, TE OEGOT							· · · · · · · · · · · · · · · · · · ·					
									FL	Zip Code	9	
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 X Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees											<b>?</b>	
10. OFFICERS AND DIRECTORS 11								CHANGES TO OFFI				
TITLE NAME	DPST					DPS:	r pollo,	Ramon	ŧ	∑] Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	C/O 1221 MIAMI, FL	BRICKELL AVENUE 33131			EET ADDRESS	7315	S.W.	87th Ave,	, Suit	e 200	o	
TITLE	DAS	TITL	E	DAS				Change	Addition			
NAME STREET ADDRESS		LO DE BONIFASI, MAR CKELL AVENUE	IA E	NAM STRE	ET ADDRESS	731:	5 S.W.	e Bonifasi 87th Ave.	., Sui	te 20	00	
CITY-ST-ZIP	MIAMI, FL	33131		CITY			ni, FL	33173				
TITLE NAME	DV Delete TIT					DV Camr	20110 de	e Garcia, F		X Change	Addition	
STREET ADDRESS	EET ADDRESS C/O 1221 BRICKELL AVENUE					7315	S.W.	87th Ave,	, Suit	e 200	)	
CITY-ST-ZIP	MIAMI, FL 33131 CI					Miar	ni, FL	33173				
TITLE NAME			☐ Delete	TITL NAM			<u> </u>	mn 1 1 9		Change	Addition	
STREET ADDRESS				STRE	EET ADORESS		0370	00119: 6/0801016	5012°	**150	0.00	
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I TITLE NAME			☐ Delete	TiTL NAM					l	) Change	Addition	
STREET ADDRESS					EET ADDRESS						.	
CITY-ST-ZIP			☐ Delete	TITL	-ST-ZIP						Addition	
TITLE NAME			CT nesere	NAM						_1 change	- Audition	
STREET ADDRESS				EET ADDRESS								
12 Lhereby	Certify that th	e information supplied with	this filing does not quality for		emptions co	ontained	d in Chapter 11	9, Florida Statutes I	further certify	that the in	formation	
12. I hereby certify that the information supplied with this filling 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 B ock 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.												
SIGNATURE:												