2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000017048

10695 SW 5TH STREET

MIAMI, FL 33174

Address: City-St-Zip:

Entity Name: INTERACTIVE FINE ART.COM, INC.

FILED Apr 23, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|---|---------------------------------|---|--|--|
| 10695 SW MIAMI, FL | 5TH STREET 33174 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| 10695 SW MIAMI, FL | 5TH STREET 33174 | | | | |
| FEI Number | : 82-0588965 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | l Address of C | urrent Registered Agent: | Name and Address of | Name and Address of New Registered Agent: | |
| 8905 S.W. SUITE 200 | A, DIEGO E C.P 87TH AVENUE) 33176 US | | | | |
| | e named entity si e of Florida. | ubmits this statement for the p | urpose of changing its registered | d office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electroni | c Signature of Registered Age | nt | Date | |
| Election Ca | mpaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P () MARTINEZ, ALF 10695 SW 5TH S MIAMI, FL 3317 | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | V () MARTINEZ, GLC 10695 SW 5TH S MIAMI, FL 3317 | STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | S () MARTINEZ, MAII | Delete BE | Title: Name: | () Change () Addition | |

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: GLORIA M. MARTINEZ V 04/23/2008