2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 556788

FILED Mar 18, 2009 Secretary of State

Entity Nan	ne: ARTSEN	NTRY CORPORATION					
Current Principal Place of Business:				New Principal Place of Business:			
UNIT L	RK CENTER I	DR US					
Current Mailing Address:				New Mailing Address:			
APT. 1105	FSTREAM A\ A, FL 34236	/ENUE US					
FEI Number:	59-1839629	FEI Number Applied Fo	or () FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
APT. 1105	I, ANN FSTREAM A\ A, FL 34236						
The above in the State		submits this statement	for the purpose o	f changing it	ts registere	ed office or registered agent, or both,	
SIGNATUR	RE:						
	Electro	nic Signature of Registe	ered Agent			Date	
Election Can	npaign Financii	ng Trust Fund Contribution	ı ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address:	SOLOMON, À) Delete NN REAM AVE, APT. 1105		Title: Name: Address:	PRES SOLOMON, 1255 GULF	(X) Change()Addition I, ANN FSTREAM AVE, APT. 1105	

City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 US () Delete Title: (X) Change () Addition

SOLOMON, MICHELE SOLOMON, MICHELE Name: Name: Address: 40 EARNEST RD. Address: 40 EARNEST RD. CHUCKEY, TN 37641 CHUCKEY, TN 37641 US City-St-Zip: City-St-Zip:

Title: Title: VD () Delete (X) Change () Addition

Name: SOLOMON, MICHAEL Name: SOLOMON, MICHAEL Address: 51 MIDDLE HIGHWAY Address: 51 MIDDLE HIGHWAY City-St-Zip: EAST HAMPTON, NY 11937 City-St-Zip: EAST HAMPTON, NY 11937 US

Title: () Delete Title: DIR () Change (X) Addition

YOUNG, NOAH Name: Name: Address: Address: 117 WEST GROVE ST. GREENEVILLE, TN 37745 US City-St-Zip: City-St-Zip:

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.

SIGNATURE: ANN F. SOLOMON **PRES** 03/18/2009