

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005822

FILED
Apr 16, 2007
Secretary of State

Entity Name: DANIEL'S ARTISTIC ENTERPRISES INC.

Current Principal Place of Business:

355 ALBA BLVD.
LAWRENCVILLE, GA 30043

New Principal Place of Business:

Current Mailing Address:

355 ALBA BLVD.
LAWRENCVILLE, GA 30043

New Mailing Address:

FEI Number: 58-2377889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORARU, DANIEL
13400 SUTTON PARK DR S SUITE 1604
JACKSONVILLE, FL 322245 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: PCD () Delete
Name: MORARU, DANIEL
Address: 380 WILDWOOD LAKE COURT
City-St-Zip: SUWANEE, GA 30024

Title: VT () Delete
Name: MORARU, JOHN
Address: 545 CAMP PERRIN ROAD
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: S () Delete
Name: MORARU, CONSTANTIN
Address: 355 ALBA BOULEVARD
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: D () Delete
Name: MORARU, ALIN
Address: 355 ALBA BOULEVARD
City-St-Zip: LAWRENCEVILLE, GA 30043

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:

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: DANIEL MORARU

PCD

04/16/2007

Electronic Signature of Signing Officer or Director

Date