2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L08748

312 JACK DR

COCOA BEACH, FL 32931

Address:

City-St-Zip:

FIETH AVENUE ART GALLERY INC.

FILED May 01, 2008 Secretary of State

Entity Nai	me: FIFTH AV	ENUE ART GALLERY, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	HLAND AVE RNE, FL 32935	US					
Current Mailing Address:			New Maili	New Mailing Address:			
	HLAND AVE. RNE, FL 32935	US					
FEI Number:	: 59-2966570	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	l Address of C	urrent Registered Agent:	Name and	Address of	f New Registered Agent:		
STE 306	ELEESQ (ICKHAM ROAI RNE, FL 32940						
	named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or bo	oth,	
SIGNATUR	RE:						
	Electron	ic Signature of Registered Age	ent	Date			
		8(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notic	e.			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () SHANNON, KAY 5149 WEXFOR VIERA, FL 329	D DR	Title: Name: Address: City-St-Zip:	NEWMAN, M 335 S. LAKE			
Title: Name: Address: City-St-Zip:	VPD () TSAMOUTALES 2293 VENETIA INDIALANTIC, F	PLACE	Title: Name: Address: City-St-Zip:		()Change ()Addition		
Title: Name: Address: City-St-Zip:	T () MITTLEMAN, LO 1634 FICAS PO MELBOURNE, F	INT DR.	Title: Name: Address: City-St-Zip:	T MITTLEMAN 1634 FICUS MELBOURNI	POINT DR.		
Title:	SD ()	Delete	Title:		() 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: LOIS ANN MITTLEMAN TREA 05/01/2008