



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90006 011 ***150.00

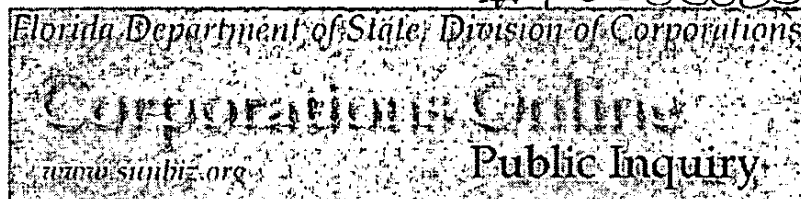
DOCUMENT # P00000055834 1. Entity Name ARTISTIC VIDEO INC.					
Principal Place of Business 7434 NW 33RD ST LAUDERHILL, FL 33319			Mailing Address 7434 NW 33RD ST LAUDERHILL, FL 33319		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-1016364	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SARDI, EVE 101 BRINY AVE 1705 POMPAHO BEACH, FL 33062			7. Name and Address of New Registered Agent Name PARISI, PETER .P. Street Address (P.O. Box Number is Not Acceptable) 4045 N.W. 16th Street III City Fort Lauderdale State FL Zip Code 33313		
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  PETER PARISI DATE 2/21/06 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELKUBI, AVI 7434 NW 33RD ST LAUDERHILL, FL 33319	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			SIGNATURE: 		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____ Daytime Phone # _____		

40017310



02212006 Chg-P CR2E034 (11/05)

#P000000255834



Florida Profit

ARTISTIC VIDEO INC.

PRINCIPAL ADDRESS

7434 NW 33RD ST
LAUDERHILL FL 33319
Changed 04/19/2004

MAILING ADDRESS

7434 NW 33RD ST
LAUDERHILL FL 33319
Changed 04/19/2004

Document Number
P00000055834

FEI Number
651016364

Date Filed
06/01/2000

State
FL

Status
ACTIVE

Effective Date
NONE

Last Event
REINSTATEMENT

Event Date Filed
04/19/2004

Event Effective Date
NONE

Registered Agent

Name & Address
SARDI, EVE 101 BRINY AVE 1705 POMPANO BEACH FL 33062

Officer/Director Detail

Name & Address	Title
ELKUBI, AVI 7434 NW 33RD ST LAUDERHILL FL 33319	D

ATTACHMENT

40017516

#P00000055834
Annual Reports

Report Year	Filed Date
2003	04/19/2004
2004	04/19/2004
2005	04/28/2005

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Document Images

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[03/29/2002 -- COR - ANN REP/UNIFORM BUS REP](#)
[05/14/2001 -- Annual Report](#)
[06/01/2000 -- Domestic Profit](#)

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT[Corporations Inquiry](#)[Corporations Help](#)