

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000085459

FILED
Mar 07, 2004
Secretary of State

Entity Name: ARTESUR, INC.

Current Principal Place of Business:

320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33687

New Principal Place of Business:

320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33487

Current Mailing Address:

320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33687

New Mailing Address:

320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33487

FEI Number: 59-3670292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, PATRICIA I
320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33687

Name and Address of New Registered Agent:

HANSON, PATRICIA I
320 NORTH WEST 67TH ST #204
BOCA RATON, FL 33487

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: CARLOS OSPINA

03/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OSPINA, CARLOS A
Address: 320 SOUTH WEST 67TH ST #204
City-St-Zip: BOCA RATON, FL 33687

Title: SD () Delete
Name: HANSON, PATRICIA I
Address: 320 SOUTH WEST 67TH ST #204
City-St-Zip: BOCA RATON, FL 33687

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OSPINA, CARLOS A
Address: 320 SOUTH WEST 67TH ST #204
City-St-Zip: BOCA RATON, FL 33487

Title: SD (X) Change () Addition
Name: HANSON, PATRICIA I
Address: 320 SOUTH WEST 67TH ST #204
City-St-Zip: BOCA RATON, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS OSPINA

PD

03/07/2004

Electronic Signature of Signing Officer or Director

Date