

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000047210

Entity Name: ARTISTIC PROJECTS, INC.

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

8362 U.S. HWY 441 SE  
#18  
OKEECHOBEE, FL 34974 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

8362 U.S. HWY 441 SE  
#18  
OKEECHOBEE, FL 34974 US

## **New Mailing Address:**

FEI Number: 59-3717496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

SOKOLOWSKI, MARK  
8362 U.S. HWY 441 SE  
#18  
OKEECHOBEE, FL 34974 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: D  
Name: SOKOLOWSKI, MARK  
Address: 8362 U.S. HWY 441 SE #18  
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: D  
Name: BLACK, TINA  
Address: 211 MEADOWS DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33436

I hereby 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 all other like empowered.

SIGNATURE: MARK SOKOLOWSKI

D

04/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date