

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000091613

FILED
Dec 12, 2005
Secretary of State**Entity Name:** CODE ARTISTS, INC.**Current Principal Place of Business:**3841 NE 2ND AVE
SUITE 203
MIAMI, FL 33137**New Principal Place of Business:**227 9TH STREET
2ND FLOOR
MIAMI BEACH, FL 33139**Current Mailing Address:**3841 NE 2ND AVE
SUITE 203
MIAMI, FL 33137**New Mailing Address:**227 9TH STREET
2ND FLOOR
MIAMI BEACH, FL 33139**FEI Number:** 14-1845142**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ANGELL, ANTHONY
3255 N E 184TH ST
APT 12216
AVENTURA, FL 33160 US**Name and Address of New Registered Agent:**ANGELL, ANTHONY
227 9TH STREET
2ND FLOOR
MIAMI BEACH, FL 33139 US

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

12/12/2005

Date**OFFICERS AND DIRECTORS:****Title:** PD () Delete
Name: ANGELL, ANTHONY
Address: 3255 N E 184TH ST
City-St-Zip: AVENTURA, FL 33139**Title:** VD () Delete
Name: ANGELL, BETHANI
Address: 3255 N E 184TH ST
City-St-Zip: AVENTURA, FL 33160**Title:** SD (X) Delete
Name: KELLY, SIDNEY
Address: 1300 COLLINS APT 200
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: ANGELL, ANTHONY
Address: 900 4TH STREET, UNIT #2
City-St-Zip: MIAMI BEACH, FL 33139**Title:** VD (X) Change () Addition
Name: ANGELL, BETHANI
Address: 900 4TH STREET, UNIT #2
City-St-Zip: MIAMI BEACH, FL 33139**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 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: ANTHONY ANGELL

PD

12/12/2005

Electronic Signature of Signing Officer or Director_____
Date