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Jun 04, 2008 8:00 am
Secretary of State
06-04-2008 90003 039 ***150.00

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000109077

1. Entity Name
U.S. ART, CORP.

401U7540

Principal Place of Business	Mailing Address
9600 N.W. 25TH STREET SUITE 6-A MIAMI, FL 33172-1416	9600 N.W. 25TH STREET SUITE 6-A MIAMI, FL 33172-1416

DO NOT WRITE IN THIS SPACE

02/05/2008 No Chg-P QR2E034 (11/05)

4. FEI Number
55-0802848
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

IZQUIERDO, MARIA R
421 SW 87TH CT.
MIAMI, FL 33174

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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 _____ DATE
(Required when mailed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing)

FILE NOW!!! Fee is $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	CARBAJO, JOSE L.
STREET ADDRESS	9600 N.W. 25TH STREET SUITE 6-A
CITY-ST-ZIP	MIAMI, FL 331721416
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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] 04/21/08 305-477-2939
(SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL) (Date) (Daytime Phone #)