

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106595

FILED
Jan 19, 2005
Secretary of State

Entity Name: ARTISTIC TOUCH MAINTENANCE SPECIALISTS, INC.

Current Principal Place of Business:

8879 W COLONIAL DR
#174
OCOOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

8879 W COLONIAL DR
#174
OCOOE, FL 34761

New Mailing Address:

FEI Number: 20-0784406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JENSEN, SHAWN
1040 YELLOW ROSE DR
ORLANDO, FL 32818 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: P () Delete
Name: JENSEN, SHAWN
Address: 1040 YELLOW ROSE DR
City-St-Zip: ORLANDO, FL 32818

Title: V () Delete
Name: JENSEN, CYNTHIA
Address: 1040 YELLOW ROSE DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: V () Delete
Name: JENSEN, BRANDON
Address: 1040 YELLOW ROSE DRIVE
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHAWN JENSEN

P

01/19/2005

Electronic Signature of Signing Officer or Director

_____ Date