

2004 FOR PROFIT CORPORATION ANNUAL REPORT

2004 FOR PROFIT CORPORATION ANNUAL REPORT						FILED				
DOCUMENT # P03000134293 1. Entity Name ACTUM ART SERVICE, CORP.						O4 OCT 25 AM IO: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place 7537 WEST TO N BAY VILLAGE	reasure dr.	Mailing Address 7537 WEST TREASURE DR. N BAY VILLAGE, FL 33141				1 :01 (1 01) (1)	TALLA	ASSEE		
2. Principal Pla	ice of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03252004	Chg-P	CR2E0	34 (10/03))	
City & State	· · · · · · · · · · · · · · · · · · ·	City & State				4. FEI Number 56 -	241 63	390	<u> </u>	ot Applicable
Zip	Country	Ζp	Coun	itry		5. Certificate	of Status Desired		\$8.75 Ac Fee Requir	
		Name		7. Name and	Address of New	Registered	Agent			
LONA, LAURA 7537 WEST TREASURE DR. N BAY VILLAGE, FL 33141				Street Address (P.O. Box Number is Not Acceptable)						
	1 ^			Cin					Zin C-	de
8. The above named entity submittenthis statement for the purpose of changing its re				City	FL Zip Code					
	named entity supprinted this statement to one of registered agent.)				ed agent, or bo		DATE	(SITTER) WILL	i, and accept
	NOW!!! FEE IS \$150.00 / 1, 2004 Fee will be \$550.0	9. Election Campa	gn Finai	ncing 🖺	(\$5.	OO May Be	v			
10.	OFFICERS AND		11.			ADDITIONS	CHANGES TO O	FFICERS AND		
NAVE Street address	PSD LONA, LAURA 7537 WEST TREASURE DR. N BAY VILLAGE, FL 33141	Celele		t t					☐ Change	☐ Addition
NAME STREET ADDRESS	VTD NAVARRO, JULIAN 7537 WEST TREASURE DR. N BAY VILLAGE, FL 33141	X Delete		2F	1417 155 153 101	e Iolia	n Nava Treasi	arko The Dr	Change 314	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	•	£				-	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		است	E	nst/	ATEM	ENT	Change	Addition
TIFLE NAME STREET ADDRESS CITY-ST-21P		☐ Delete		f			(//n	10/24
ITTLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	ÇIT	VE LEET ADDRESS Y-ST-ZP	d	3/04	71250	ofe	Chang	150.00
12. I hereby or indicated of the corp changed.	entify that the information supplied with on this report or supplemental report is obtain or the receiver or trustee empor or on an attachment with an address.	this tiling does not qualify to true and accurate and that is well as the second this report with all other like empowered	r the ext ny signa as requ	emption stat ature shall ha ired by Cha	ed in So ave the pter 60	ection 119.07(3) same legal effe 7, Florida Statut	(i), Florida Statute of as if made und es; and that my n	es. I further ce er oath; that I ame appears	ertify that the am an offic in Block 10	e information er or director or Block 11 if

Actum Art Services

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Division Of Corporations PO Box 6198 Tallahassee, FL 32314-6198

RE: Entity Name: ACTUM ART SERVICE, CORP.

Document Number: PO3000134293

To Whom It May Concern:

This letter is to discuss the note of cancellation regarding out Corporation. We filed the annual report with the amount of \$150.00 on time, April 2004. Later this year, we received a letter requesting some missing information in the form, specifically our FEI. We replied immediately supplying such number.

We assumed our letter never got to your offices. Please reconsider your act of cancellation. Feel free to contact us directly at (305) 244-1330.

Best regards

Laura Lona

President

Actum Art Services, Corp.

7537 West Tresure Dr.

North Bay Village, FL 33141