2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079946

Entity Name: ARTOPIA USA INC.

FILED Jun 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3543 FOX HOLLOW DR. 1460 N GOLDENROD RD ORLANDO, FL 32829

135

ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

3543 FOX HOLLOW DR. 1460 N GOLDENROD RD ORLANDO, FL 32829 US

ORLANDO, FL 32807 US

FEI Number: 02-0723572 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAITHAM, MUHAMMAD SARYOUL, MUHAMMAD H 3543 FOX HOLLOW DR. 1460 N GOLDENROD RD ORLANDO, FL 32829 ORLANDO, FL 32807 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: MUHAMMAD H SARYOUL 06/02/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition HAITHAM, MUHAMMAD SARYOUL, MUHAMMAD H Name: Name: Address:

3543 FOX HOLLOW DR 1460 N GOLDENROD RD SUITE 135 Address:

City-St-Zip: ORLANDO, FL 32829 US City-St-Zip: ORLANDO, FL 32807 US

VΡ Title: VΡ (X) Change () Addition Title: () Delete

Name: SMITH, MELISSA A Name: SMITH, MELISSA A

3543 FOX HOLLOW DR 1460 N GOLDENROD RD SUITE 135 Address: Address: ORLANDO, FL 32829 US ORLANDO, FL 32807 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

KASHEF, SOUAD S Name: SREWEL, HASSAN I Name:

3543 FOX HOLLOW DRIVE 1460 N. GOLDENROD RD SUITE 135 Address: Address:

City-St-Zip: ORLANDO, FL 32829 US City-St-Zip: ORLANDO, FL 32807 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Ρ SIGNATURE: MUHAMMAD H SARYOUL 06/02/2006