

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000122965

FILED
Feb 05, 2005
Secretary of State

Entity Name: ARTE DIRECT, INC.

Current Principal Place of Business:

109 GEORGETOWN BLVD
NAPLES, FL 34112

New Principal Place of Business:

6240 SHIRLEY STREET
102
NAPLES, FL 34109

Current Mailing Address:

109 GEORGETOWN BLVD
NAPLES, FL 34112

New Mailing Address:

6240 SHIRLEY STREET
102
NAPLES, FL 34109

FEI Number: 83-0405284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
773 4TH AVE NORTH SUITE E
NAPLES, FL 34102 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: DP () Delete
Name: PETERSON, KATHLEEN F
Address: 109 GEORGETOWN BLVD
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: DAVIS, HERMINIA
Address: 694 LAMBTON LANE
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KATHLEEN F. PETERSON

DP

02/05/2005

Electronic Signature of Signing Officer or Director

_____ Date