

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000131654

Entity Name: ARTEK ARCHITECTURAL CORP

FILED
Apr 08, 2006
Secretary of State

Current Principal Place of Business:

16909 N. BAY ROAD APT # 119
SUNNY ISLES, FL 33160

New Principal Place of Business:

16909 N. BAY ROAD APT 119
SUNNY ISLES, FL 33160

Current Mailing Address:

16909 N. BAY ROAD APT # 119
SUNNY ISLES, FL 33160

New Mailing Address:

16909 N. BAY ROAD APT 119
SUNNY ISLES, FL 33160

FEI Number: 20-1640924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUARTE, HECTOR O P
16909 N BAY ROAD APT # 119
SUNNY ISLES, FL 33160 US

Name and Address of New Registered Agent:

HUARTE, HECTOR O P
16909 N BAY ROAD APT 119
SUNNY ISLES, FL 33160 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: ORLANDO HUARTE

04/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUARTE, HECTOR O
Address: 16909 N BAY ROAD APT # 119
City-St-Zip: SUNNY ISLES, FL 33160

Title: VP () Delete
Name: HUARTE, DARIO
Address: 16909 N. BAY ROAD APT # 119
City-St-Zip: SUNNY ISLES, FL 33160

Title: S () Delete
Name: HUARTE, NICOLAS D
Address: 16909 N BAY ROAD APT # 119
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HUARTE, HECTOR O
Address: 16909 N BAY ROAD APT 119
City-St-Zip: SUNNY ISLES, FL 33160

Title: VP (X) Change () Addition
Name: HUARTE, DARIO
Address: 16909 N. BAY ROAD APT 119
City-St-Zip: SUNNY ISLES, FL 33160

Title: S (X) Change () Addition
Name: HUARTE, NICOLAS D
Address: 16909 N BAY ROAD APT 119
City-St-Zip: SUNNY ISLES, FL 33160

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.

SIGNATURE: ORLANDO HUARTE

PD

04/08/2006

Electronic Signature of Signing Officer or Director

Date