

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169740

FILED  
Jul 03, 2007  
Secretary of State

Entity Name: PRIDE'S BODY ART AND PORTRAIT GALLERY, INC.

## Current Principal Place of Business:

710 WASHINGTON AVE  
CU #4 & 5  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

10860 SW 158 LANE  
MIAMI, FL 33157

## New Mailing Address:

FEI Number: 20-3255024

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSTOS, LUIS F  
14460 SW 166 TERRACE  
MIAMI, FL 33177 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

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:

Title: P ( ) Delete  
Name: BUSTOS, LOUIS F  
Address: 14460 SW 166 TERRACE  
City-St-Zip: MIAMI, FL 331771720

Title: VP (X) Delete  
Name: BUSTOS, BEATRIZ E  
Address: 14460 SW 166 TERRACE  
City-St-Zip: MIAMI, FL 331771720

Title: T (X) Delete  
Name: BUSTOS, LOUIS F  
Address: 14460 SW 166 TERRACE  
City-St-Zip: MIAMI, FL 331771720

Title: VP (X) Delete  
Name: BUSTOS, ROMAN  
Address: 10860 SW 158 LANE  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BUSTOS, GINA  
Address: 10860 SW 158 LANE  
City-St-Zip: MIAMI, FL 33157

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 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: GINA BUSTOS

PD

07/03/2007

Electronic Signature of Signing Officer or Director

Date