


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90280 015 ***150.00

DOCUMENT # P05000000555	
1. Entity Name MARCELLE C ZANETTI FINE ARTS, INC	

Principal Place of Business 17571 SOUTH DIXIE HIGHWAY MIAMI, FL 33157 US	Mailing Address 17571 SOUTH DIXIE HIGHWAY MIAMI, FL 33157 US
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2. Principal Place of Business - No P.O. Box # 7455 SW 166 Terrace	3. Mailing Address 7455 SW 166 Terrace
Suite, Apt. #, etc. MIAMI, FLORIDA	Suite, Apt. #, etc. MIAMI, FL.
City & State 33157	City & State
Zip USA	Country USA

01162007 Chg-P CR2E034 (12/06)

4. FEI Number 20-2087189	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Fee Reduced
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6. Name and Address of Current Registered Agent ZANETTI, MARCELLE C 17571 SOUTH DIXIE HIGHWAY MIAMI, FL 33157	7. Name and Address of New Registered Agent Name MARCELLE C. ZANETTI Street Address (P.O. Box Number is Not Acceptable) 7455 SW 166 Terrace City MIAMI FL Zip Code 33157
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8. 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. I am familiar with, and accept the obligations of a registered agent.	
SIGNATURE <i>Marcelle C. Zanetti</i>	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZANETTI, MARCELLE C 7455 SW 166 TERRACE MIAMI, FL 33157 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
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SIGNATURE: <i>Marcelle C. Zanetti</i>	Date 4/20/07	Daytime Phone # 305-2340716
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