

2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Jun 16, 2006
Secretary of State**

DOCUMENT# P05000032172

Entity Name: ARTISIANS OF WOOD INC.

Current Principal Place of Business:

114 4TH AV SW
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

114 4TH AV SW
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANRIQUE, ROBERT
114 4TH AV SW
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

ESPINOZA, JUAN A
114 4TH AV SW
FORT WALTON BEACH, FL 32548 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: JUAN ESPINOZA 06/16/2006
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:

Title: PVD () Delete
Name: MANRIQUE, ROBERT
Address: 114 4TH AV SW
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: ST () Delete
Name: MANRIQUE, ROBERT
Address: 114 4TH AV SW
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change () Addition
Name: ESPINOZA, JUAN A
Address: 114 4TH AV SW
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: ST (X) Change () Addition
Name: CARLOS, BUESO
Address: 114 4TH AV SW
City-St-Zip: FORT WALTON BEACH, FL 32548

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: JUAN ESPINOZA PVD 06/16/2006
Electronic Signature of Signing Officer or Director Date