

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032172

Entity Name: ARTISIANS OF WOOD INC.

FILED  
Sep 04, 2007  
Secretary of State

**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:**

701 STEPHEN MOODY ST SE APT 1334  
ALBUQUERQUE, NM 87123

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

**Name and Address of Current Registered Agent:**

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                      ST                      (X) Change ( ) Addition  
Name:                      DAVID, ESPINOZA  
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 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

P

09/04/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date