2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2006 8:00 am Secretary of State

| ANNUAL REPURI | | | | | | . Secretary or state | | | |
|---|---|---|---------------------|--|---------------------------|---------------------------|----------------------------|-----------------------------|--|
| DOCUMENT # P05000057493 1. Entity Name CLARA'S ART, INC. | | | | | | 04-19-2006 | 5 90107 029 *** <u>:</u> | 150.00 | |
| Principal Plac | ce of Business | Mailing Address | Mailing Address | | | | 500137 | 22 | |
| 12851 S.W. 52ND STREET MIRAMAR, FL 33027 | | 12851 S.W. 52ND STREET MIRAMAR, FL 33027 | | | | 000201 | ~~ | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 04062006 | Chg-P | CR2E034 (11/05 |) | |
| City & State | | City & State | City & State | | 4. FEI Numbe | | | Applied For | |
| Zip | Country | Zip Cou | | ry | | 0750 of Status Desired | 308 N 58.75 AG | lot Applicable Iditional | |
| | 6. Name and Address of Current Registered Agent | | <u> </u> | | | | Fee Requir | ed | |
| VICIOSO, RAFAEL N | | | | 7. Name and Address of New Registered Agent Name | | | | | |
| 12851 SW | 52 STREET | | Street Add | | P.O. Box Numbe | r is Not Acceptable | 9) | | |
| MIRAMAR | R, FL 33027 | | | | | · | | - | |
| | | | - | City | | | FL Zip Co | de | |
| The above named entity submits this statement for the purpose of changing its registered of the obligations of consistency appears. | | | | | red agent, or both | n, in the State of Flo | | , and accept | |
| The congenions of regustered agent. | | | | | | | | | |
| SIGNATURE Signature, ryped or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) OATE | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financi Trust Fund Contribution. | | | | | .00 May Be led to Fees | | | <u> </u> | |
| 10. | OFFICERS ANI | | 11. | | ADDITIONS/0 | CHANGES TO OFF | ICERS AND DIRECTOR | RS IN 11 | |
| TITLE NAME | (101000 01 101 5 | | TITLE | | | | ☐ Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP | 12851 SW 52ND STREET ST | | STREE | TI ADDRESS SI-ZIP | | | | | |
| TITLE | | | TITLE | | , | | ☐ Change | Addition | |
| STREET ADDRESS | 10051 011 0010 0000 | | NAME STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | CITY- | ST-ZIP | | | | | |
| TITLE NAME | | ☐ Delele | TITLE NAME | | | | ☐ Change | Addition | |
| STREET ADDRESS | | | STREE | 1 ADDRESS | | | | | |
| CITY-SI-ZIP | | Пои | | ST-ZIP | | | | | |
| NAME | ☐ Delete | | TITLE | | | | ☐ Change | Addition | |
| STREET ADDRESS CITY-ST-ZIP | 3. | | | T ADDRESS ST-ZIP | | | | | |
| TITLE | | | TITLE | | | | Change | Addition | |
| NAME STREET ADDRESS | | | NAME | | | | | | |
| CIFY-ST-ZIP | | | | T ADDRESS ST- ZIP | | | | | |
| TITLE NAME | | ☐ Delete | TITLE | | | • | ☐ Change | Addition | |
| STREET ADDRESS | | | NAME STREE | 1 ADDRESS | | | | | |
| CITY-ST-ZIP | amalification and the state of | | | ST-ZIP | 7_ | | | | |
| indicated | certify that the information supplied wi | in this tiling does not qualify for | r the exe | mptions contained | in/Chapter 119, | Elerida Statutes | Tyrther certify that the i | information | |

The Buy Certify that the information supplied with this filing does not qualify for the exemptions confined by Chapter 119, Elema Statutes, Flyther 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 only, 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 fame appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE?

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V 04-17-06

Daytime Phone #