2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000154361

Entity Name: ARTS TOUR MANAGEMENT SERVICES, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8625 94TH AVENUE

VERO BEACH, FL 32967 US

Current Mailing Address: New Mailing Address:

1489 SOUTH MAIN STREET CHESHIRE, CT 06410 US

FEI Number: 20-3835899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PRESIDENTIAL SERVICES INCORPORATED

1217 CAPE CORAL PARKWAY

#300

MORR, ALEXANDER VP
8625 94TH AVENUE
VERO BEACH, FL 32967

CAPE CORAL, FL 33904 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: ALEXANDER MORR 04/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

CHESHIRE, CT 06410 US

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

NEW YORK, NY 10065 US

US

Title: P () Delete Title: P (X) Change () Addition Name: MORR, THERESE M P MORR, THERESE M P

 Name:
 MORR, THERESE M P

 Address:
 1489 S. MAIN ST.

 City-St-Zip:
 CHESHIRE, CT 06410 US

 Name:
 MORR, THERESE M P

 Address:
 1489 S. MAIN ST.

 City-St-Zip:
 CHESHIRE, CT 06410 US

Title: VP () Delete Title: VP (X) Change () Addition Name: MORR, ALEXANDER VP Name: MORR, ALEXANDER VP

Name:MORR, ALEXANDERName:MORR, ALEXANDER VPAddress:8625 94TH AVENUEAddress:8625 94TH AVENUECity-St-Zip:VERO BEACH, FL 32967 USCity-St-Zip:VERO BEACH, FL 32967 US

 Title:
 T
 () Delete
 Title:
 T
 (X) Change () Addition

 Name:
 MORR, ALEXANDER E
 Name:
 MORR, ALEXANDER E T

 Address:
 1489 S. MAIN ST.
 Address:
 400 EAST 64TH STREET, APT. 2A

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.

City-St-Zip:

SIGNATURE: ALEXANDER MORR VP 04/15/2009