

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072707

Entity Name: ARTISTONE, INC.

FILED  
Sep 04, 2007  
Secretary of State

## Current Principal Place of Business:

4800 26TH PLACE SOUTHWEST  
#3  
NAPLES, FL 34116

## New Principal Place of Business:

2135 PAR DR  
NAPLES, FL 34120

## Current Mailing Address:

4800 26TH PLACE SOUTHWEST  
#3  
NAPLES, FL 34116

## New Mailing Address:

2135 PAR DR.  
NAPLES, FL 34120

FEI Number: 20-4896641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZAPATA, UBALDO D  
4800 26TH PLACE SOUTHWEST  
#3  
NAPLES, FL 34116 US

## Name and Address of New Registered Agent:

ZAPATA, UBALDO D  
2135 PAR DR.  
NAPLES, FL 34120 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: UBALDO ZAPATA

09/04/2007

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: D ( ) Delete  
Name: ZAPATA, UBALDO D  
Address: 4800 26TH PLACE SOUTHWEST, #3  
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete  
Name: ZAPATA, DORIS  
Address: 4800 26TH PLACE SOUTHWEST, #3  
City-St-Zip: NAPLES, FL 34116

Title: D ( ) Delete  
Name: ZAPATA, JAIME  
Address: 2215 GROVE DRIVE  
City-St-Zip: NAPLES, FL 34120

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ZAPATA, UBALDO D  
Address: 2135 PAR DR.  
City-St-Zip: NAPLES, FL 34120

Title: D (X) Change ( ) Addition  
Name: ZAPATA, DORIS  
Address: 2135 PAR DR.  
City-St-Zip: NAPLES, FL 34120

Title: D (X) Change ( ) Addition  
Name: ZAPATA, JAIME  
Address: 2111  
City-St-Zip: PAR DR, FL 34120

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: UBALDO ZAPATA

D

09/04/2007

Electronic Signature of Signing Officer or Director

Date