2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 14, 2008 08:00 All Secretary of State **DOCUMENT # P06000088353** 1. Entity Name ART SINGLE INC. Principal Place of Business Mailing Address **186 WEST MOOR BND** 186 WEST MOOR BND ORLANDO, FL 32835 US ORLANDO, FL 32835 US | HEATHER HI ORIGO CHI BRIK BRIK ORIK ERIK BRIK HEHR HEID HIRE HIR KIRK SHER MILITA HIRE . 2864 **47**66 **49**64 **47**66 **40**69 4868 (02**3**6 168 466 666) 187**6**7 1979 04102008 No Chg P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SOUZA, SERGIO V DO NOT WRITE 186 WEST MOOR BND ORLANDO, FL 32835 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. : After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PRES MLE SOUZA, SERGIO V NAME STREET ADDRESS 186 WEST MOOR BND U000000897079 CITY-ST-ZIE ORLANDO, FL 32835 n4/25/08-80034-009 150.00 TITLE NAME. STREET ADDRESS CITY-ST-ZIF TITLE STREET ADDRESS DO NOT WRITE CITY-ST-7/P TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ÍШ

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CICNATUDE

NAME STREET ADDRESS

CITY-ST-7IP

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E. SEREID SOUZA 04/10/08 (754)285 5826