

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90023 018 ***150.00

DOCUMENT # P06000115097

1. Entity Name

FIRST IMPRESSIONS INTERNATIONAL ART, INC.



Principal Place of Business

4811 LYONS TECHNOLOGY PARKWAY
BUILDING B - SUITE #18
COCONUT CREEK FL 33073
US

Mailing Address

23068 SUNFIELD DRIVE
BOCA RATON FL 33433



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

35-2281534

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

GOLDSTEIN, MONICA I
23068 SUNFIELD DRIVE
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering.

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME GOLDSTEIN, STEVEN I
STREET ADDRESS 23068 SUNFIELD DRIVE
CITY ST / ZIP BOCA RATON FL 33433

TITLE ☐ Delete
NAME GOLDSTEIN, MONICA I
STREET ADDRESS 23068 SUNFIELD DRIVE
CITY ST / ZIP BOCA RATON FL 33433

TITLE ☐ Delete
NAME VP
NAME BEJARANO, ANTONIO X
STREET ADDRESS CDLA. LOS OLIVOS, AVDA. DEL PARQUE #123
CITY ST / ZIP GUAYAQUIL, ECUADOR EC SA

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST / ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST / ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Monica Goldstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/07
Date

Daytime Phone #