2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000145838

Entity Name
 FAUX PAWS ARTISTIC DESIGNS, INC.



FILED Apr 09, 2008 08:00 Al Secretary of State

Principal Place of Business

4461 JACONA DR.

HERNANDO BEACH, FL 34607

Mailing Address

4461 JACONA DR.

HERNANDO BEACH, FL 34607



DO NOT WRITE IN THIS SPACE

03152008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-5952727

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Addition Fee Required

6. Name and Address of Current Registered Agent

BROWN, NATALIE JO 4461 JACONA DR. HERNANDO BEACH, FL 34607

DO NOT WRITE IN THIS SPACE

					THOUTAGE
8. The above the obligat	named entity submits this statement for the pricions of registered agent.	urpose of changing its registere	ed office or reg	sistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and hite if	applicable (NOTE: Registered	ed Agent signature re	quired when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000887757
10.	OFFICERS AND DIREC	TORS	$x_i = y_i \cdot y_i'$		04/21/08-80033-004 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST BROWN, NATALIE JO 4461 JACONA DR. HERNANDO BEACH, FL 34607				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BROWN, JAMES A. 4461 JACONA DR. HERNANDO BEACH, FL 34607				
THTLE NAME STREET ADDRESS CITY-SY-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS				•	

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 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: Ledale & Brown

CITY-ST-7IP

→ 4-7-08 Date Daylor

Daytime Phone #