

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000034041

FILED  
Mar 13, 2008  
Secretary of State

Entity Name: ARTEK RENDERINGS CORP

## Current Principal Place of Business:

17150 N BAY ROAD  
2321  
SUNNY ISLES, FL 33160 US

## Current Mailing Address:

17150 N BAY ROAD  
2321  
SUNNY ISLES, FL 33160 US

## New Principal Place of Business:

17150 N BAY RD # 2321  
2321  
SUNNY ISLES, FL 33160 US

## New Mailing Address:

17150 N BAY RD  
2321  
SUNNY ISLES, FL 33160 US

FEI Number: 20-8660989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUARTE, NICOLAS D  
17150 N BAY ROAD  
2321  
SUNNY ISLES, FL 33160 US

## Name and Address of New Registered Agent:

HUARTE, NICOLAS D  
17150 N BAY RD  
2321  
SUNNY ISLES, FL 33160 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:

03/13/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HUARTE, NICOLAS D  
Address: 17150 N BAY ROAD SUITE 2321  
City-St-Zip: SUNNY ISLES, FL 33160

Title: VPD ( ) Delete  
Name: PONS, LAYMI  
Address: 17150 N BAY ROAD SUITE 2321  
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR (X) Delete  
Name: HUARTE, DARIO  
Address: VILLEGAS 645 REMEDIOS DE ESCALADA  
City-St-Zip: CAPITAL FEDERAL, BS ARGENTINA

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: HUARTE, DARIO  
Address: 17150 N BAY ROAD SUITE 2321  
City-St-Zip: SUNNY ISLES, FL 33160

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NICOLAS HUARTE

PD

03/13/2008

Electronic Signature of Signing Officer or Director

Date