

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000080172

FILED
Jan 23, 2009
Secretary of State**Entity Name:** ART EXPLOSION OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**3650 COELEBS AVE
BOYNTON BEACH, FL 33436**New Principal Place of Business:****Current Mailing Address:**3650 COELEBS AVE
BOYNTON BEACH, FL 33436**New Mailing Address:****FEI Number:** 90-0348146**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DEMPSEY, JUDY
3650 COELEBS AVE
BOYNTON BEACH, FL 33436 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** PS () Delete
Name: DEMPSEY, JUDY
Address: 3650 COELEBS AVE
City-St-Zip: BOYNTON BEACH, FL 33436**Title:** VP (X) Delete
Name: NAU, DAVID F
Address: 1758 W TERRACE DRIVE
City-St-Zip: LAKE WORTH, FL 33460**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: JUDY DEMPSEY

PS

01/23/2009

Electronic Signature of Signing Officer or Director_____
Date