

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084681

Entity Name: ARTREAL CORP.

FILED  
Feb 26, 2009  
Secretary of State

## Current Principal Place of Business:

17555 COLLINS AVENUE  
905  
SUNNY ISLES BEACH, FL 33160

## New Principal Place of Business:

1135 KANE CONCOURSE  
3-RD FLOOR  
BAY HARBOR, FL 33145

## Current Mailing Address:

17555 COLLINS AVENUE  
905  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

FEI Number: 26-3371544      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GERB, LENARD  
17555 COLLINS AVENUE  
905  
SUNNY ISLES, FL 33160 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GERB, LENARD  
Address: 17555 COLLINS AVENUE, SUITE 905  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VP ( ) Delete  
Name: ZLOCHEVSKY, NATALIE  
Address: 17555 COLLINS AVENUE, SUITE 905  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VP (X) Delete  
Name: GERB, JACOB  
Address: 17555 COLLINS AVENUE, SUITE 905  
City-St-Zip: SUNNY ISLES, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LENARD GERB

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

02/26/2009

\_\_\_\_\_  
Date