

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000082052

Entity Name: ART EXPLORERS INC.

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1229 S. ROXMERE RD.  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

1229 S. ROXMERE RD.  
TAMPA, FL 33629 US

**New Mailing Address:**

FEI Number: 27-1071565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHAPIRO, LORI  
1229 S. ROXMERE RD.  
TAMPA, FL 33629 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: P  
Name: SHAPIRO, LORI  
Address: 1229 S. ROXMERE ROAD  
City-St-Zip: TAMPA, FL 33629

Title: VP  
Name: SHAPIRO, ERIC  
Address: 1229 S. ROXMERE ROAD  
City-St-Zip: TAMPA, FL 33629

I hereby 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 all other like empowered.

SIGNATURE: LORI SHAPIRO

P

02/10/2012

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

\_\_\_\_\_  
Date