

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000084377

FILED
Apr 27, 2012
Secretary of State

Entity Name: ARTISTIC DEVELOPMENT CORPORATION

Current Principal Place of Business:

3233 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

3233 S. ANDREWS AVENUE
FT. LAUDERDALE, FL 33316

New Mailing Address:

3233 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316

FEI Number: 65-0554995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KHOURY, SALIM
3233 S. ANDREWS AVENUE
FT. LAUDERDALE, FL 33316 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: PD
Name: KHOURY, SALIM
Address: 3233 S. ANDREWS AVE.
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VD
Name: SHAMIEH, CHARLIE
Address: 3233 S. ANDREWS AVENUE
City-St-Zip: FT LAUDERDALE, FL 33316

Title: VD
Name: SHAMIEH, JIM
Address: 32333 S ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VD
Name: SHAMIEH, SHAWKI
Address: 3233 S. ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: TD
Name: SHAMIEH, NABIL
Address: 3233 S. ANDREWS AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: VP
Name: KHOURY, DEBORAH
Address: 3233 S. ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

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: SALIM KHOURY

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

_____ Date