## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000014156

1. Entity Name

ARTISTIC ENDEAVORS, INC.



## FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90436 040 \*\*\*150.00

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2 Principal P	Place of Business	3. Mailing Address	<b>第3世界的 8年24 32 33</b>		'				
•	Washington Stree	_	inatan	Ctroot					
Suite, Apt.		Suite, Apt. #, etc.	ing con	Street	DO NOT WRITE IN THIS SPACE				
City & Stat	Richey, FL	City & State	ov EI		4. FEI Number 59-3311023	Applied For Not Applicable			
Zip	Country	Port_Rich	Country		33.3332				
3466	· · · · · · · · · · · · · · · · · · ·	34668	US		5. Certificate of Status Desired   \$8.75 Addit Fee Required				
Talker and					7. Name and Address of Curi	rent Registered	Agent		
	e Mariana de la compansión			Name			<u>-</u>		
Proposition (C.) (Manuscher) Sent Call (C.) (Manuscher)	DO NOT W	RITE			F. Finotti				
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en Tourse out alteración									
		City			Richey FL 34668				
8 The above	named entity submits this statement for	or the purpose of changing	n its registered						
	ions of registered agent.	or the purpose of changing	g its registered i	onice or registere	sa agent, or both, in the state of	TT TOTICA. T all La	rilliai witri, ario accept		
	N	0							
SIGNATURE 4	Drawn H. funth	fus. Dianne.	F. Fin	otti Pr	es. $2/5$	/03			
	Signature, typed or printed name of registered agent	and title if applicable. (	NOTE: Registered Aç	ent signature required	when reinstating)	DATE			
	nuary 1 - May 1 Fee is \$150.00			-	6 Flooring Communication				
	After May 1, Fee is \$550.00 Amended UBR is \$61.25				9. Election Campaign Trust Fund Contribe		\$5.00 May Be		
Make Check	Payable to Florida Department of	l State			Tust Fulla Continue	JIION.	Added to Fees		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE Manuf Funth Tun Dianne F. Finotti Pres.

2/5/03

727-842-5950

Date

Daytime Phone #

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