

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90042 010 ***150.00

DOCUMENT # P96000033504

1. Entity Name
HARTMAN & COMPANY, FINE ART PUBLISHERS, INC.



Principal Place of Business
900 NW 7TH STREET ROAD
MIAMI, FL 33136

Mailing Address
900 NW 7TH STREET ROAD
MIAMI, FL 33136

2. Principal Place of Business
900 NW 7TH STREET ROAD
 Suite, Apt. #, etc.
MIAMI FL


3. Mailing Address
 Suite, Apt. #, etc.

City & State
33136

City & State

Zip
USA

Country



01262006 Chg-P CR2E034 (11/05)

4. FEI Number
33-0538184

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HARTMAN, ERICA
900 NW 7TH STREET
~~**MIAMI, FL 33136**~~

7. Name and Address of New Registered Agent

Name
HARTMAN, ERICA

Street Address (P.O. Box Number is Not Acceptable)
900 NW 7TH STREET ROAD

MIAMI FL 33136

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Erica Hartman* *Erica Hartman* *1/28/06*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P	<input type="checkbox"/> Delete
NAME HARTMAN, ERICA	
STREET ADDRESS 2030 INTRA COASTAL DR	
CITY-ST-ZIP FT LAUDERDALE, FL	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ERICA HARTMAN	
STREET ADDRESS 900 NW 7TH STREET ROAD	
CITY-ST-ZIP MIAMI FL 33136	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Erica Hartman* *1/28/06* *305 547 5472*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #