


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90045 033 \*\*\*150.00

<b>DOCUMENT # P97000067963</b>	
1. Entity Name <b>ARTIST GALLERY, INC.</b>	

Principal Place of Business <b>1333 S. UNIVERSITY DRIVE SUITE 210 PLANTATION, FL 33324</b>	Mailing Address <b>1333 S. UNIVERSITY DRIVE SUITE 210 PLANTATION, FL 33324</b>
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40016492



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01172007 Chg-P CR2E034 (12/06)

4. FEI Number <b>65-0783193</b>		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent <b>PRINCE A. DONNAHOE IV, P.A. 1333 S. UNIVERSITY DRIVE SUITE 210 PLANTATION, FL 33324</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P SHACHR, ILAN 620 NW 76 TERRACE PLANTATION, FL 33324</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VSD STIER, LISA 620 NW 76 TERRACE PLANTATION, FL 33324</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P STIER, LISA 620 NW 76 TERRACE PLANTATION, FL 33324</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/17/07 954-328-2166

40016492 ATTACHMENT # P97000067963



## Florida Profit

### ARTIST GALLERY, INC.

PRINCIPAL ADDRESS  
1333 S. UNIVERSITY DRIVE  
SUITE 210  
PLANTATION FL 33324  
Changed 04/11/2006

MAILING ADDRESS  
1333 S. UNIVERSITY DRIVE  
SUITE 210  
PLANTATION FL 33324  
Changed 04/11/2006

Document Number  
P97000067963

FEI Number  
650783193

Date Filed  
08/06/1997

State  
FL

Status  
ACTIVE

Effective Date  
NONE

Last Event  
AMENDMENT

Event Date Filed  
11/06/1998

Event Effective Date  
NONE

## Registered Agent

Name & Address
PRINCE A. DONNAHOE IV, P.A. 1333 S. UNIVERSITY DRIVE SUITE 210 PLANTATION FL 33324
Name Changed: 01/04/2005
Address Changed: 04/11/2006

## Officer/Director Detail

Name & Address	Title
<del>SHACHR, ILAN 620 NW 76 TERRACE PLANTATION FL 33324</del>	P
STIER, LISA 620 NW 76 TERRACE PLANTATION FL 33324	<del>VSD</del> P

ATTACHMENT

40016492  
# P97000067963

### Annual Reports

Report Year	Filed Date
2004	02/09/2004
2005	01/04/2005
2006	04/11/2006

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[01/30/2002 -- ANN REP/UNIFORM BUS REP](#)  
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[11/06/1998 -- Amendment](#)  
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**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

