

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000000208

Entity Name: AB ART WHOLESALERS, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

360 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS, FL 327082664

New Principal Place of Business:

Current Mailing Address:

360 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS, FL 327082664

New Mailing Address:

360 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS, FL 327082664 US

FEI Number: 59-3488282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YLIPELKONEN, MARJA-LEENA
360 OLD SANFORD-OVIEDO ROAD
WINTER SPRINGS, FL 32708 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: YLIPELKONEN, MARKUS J
Address: 360 OLD SANFORD-OVIEDO
City-St-Zip: WINTER SPRINGS, FL 32708

Title: SEC () Delete
Name: YLIPELKONEN, MARJA L
Address: 360 OLD SANFORD-OVIEDO
City-St-Zip: WINTER SPRINGS, FL 32708

Title: CFOD () Delete
Name: BROHAN, ROBERT L
Address: 215 VINEWOOD DR.
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CFOD (X) Change () Addition
Name: BROHAN, ROBERT L
Address: 5370 HARBOUR WATCH WAY # 202
City-St-Zip: MASON, OH 450408156

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT L BROHAN

CFO

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date