

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020562

Entity Name: FINE ART WHOLESALERS, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1410 S.W. 29 AVENUE
POMPANO BEACH, FL 33069

Current Mailing Address:

1410 S.W. 29 AVENUE
POMPANO BEACH, FL 33069

New Principal Place of Business:

45 SOUTH POMPADNO BEACH PARKWAY
SUITE 236
POMPANO BEACH, FL 33069

New Mailing Address:

45 SOUTH POMPADNO BEACH PARKWAY
SUITE 236
POMPANO BEACH, FL 33069

FEI Number: 65-0822849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STIER, LISA
1410 SW 29TH AVENUE
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

STIER, LISA
45 SOUTH POMPADNO BEACH PARKWAY
SUITE 236
POMPANO BEACH, FL 33069 US

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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STIER, LISA
Address: 1410 SW 29TH AVENUE
City-St-Zip: POMPADNO BEACH, FL 33069

Title: V () Delete
Name: RESTREPO, GERMAN
Address: 1410 SW 29TH AVENUE
City-St-Zip: POMPADNO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STIER, LISA
Address: 45 SOUTH POMPADNO BEACH PARKWAY #236
City-St-Zip: POMPADNO BEACH, FL 33069

Title: V (X) Change () Addition
Name: RESTREPO, GERMAN
Address: 45 SOUTH POMPADNO BEACH PARKWAY #236
City-St-Zip: POMPADNO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify 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: LISA STIER

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date