

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000101964

FILED
Jan 09, 2002 8:00 AM
Secretary of State

Entity Name: ART MARITIME, INC.

Current Principal Place of Business:

214 NE 21ST AVENUE
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

214 NE 21ST AVENUE
CAPE CORAL, FL 33909

New Mailing Address:

FEI Number: 65-0880938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAUSS, CHRISTINE
214 NE 21ST AVE
CAPE CORAL, FL 33909 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STRAUSS, HOLGER
Address: 214 NE 21ST AVE.
City-St-Zip: CAPE CORAL, FL 33909

Title: VTS () Delete
Name: STRAUSS, CHRISTINE
Address: 214 NE 21ST AVE.
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HOLGER STRAUSS

P

01/09/2002

Electronic Signature of Signing Officer or Director

Date