2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 26, 2004 08:00 AM Secretary of State **DOCUMENT # P99000081273** 1. Entity Name ARTISTE DESIGN, INC. Principal Place of Business Mailing Address 104 OAKWOOD DRIVE 104 OAKWOOD DRIVE JUPITER, FL 33458 JUPITER, FL 33458 04242004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0948875 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 5. Name and Address of Current Registered Agent KAPLAN, MARJORIE G DO NOT WRITE 104 OAKWOOD DRIVE JUPITER, FL 33458 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature regulated when reinstatung) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE NAME KAPLAN, MARJORIE G 104 OAKWOOD DR STREET ADDRESS CITY-ST-ZIP JUPITER, FL 33458 1100000132405 04/27/04-80045-009 150.80 TITLE NAME STREET ADDRESS CITY-ST-78 33TLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Floride 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 approvered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED