

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S87814

FILED  
Aug 23, 2005  
Secretary of State

Entity Name: ART FORM COLLECTION, INC.

## Current Principal Place of Business:

C/O ARMANDO J. PORTO  
14565 N.W. 26TH AVENUE  
OPA LOCKA, FL 33054

## New Principal Place of Business:

3300 UNIVERSITY DRIVE  
#706  
CORAL SPRINGS, FL 33065 US

## Current Mailing Address:

C/O ARMANDO J. PORTO  
14565 N.W. 26TH AVENUE  
OPA LOCKA, FL 33054

## New Mailing Address:

P. O. BOX 8730  
CORAL SPRINGS, FL 33075 US

FEI Number: 65-0456531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PORTO, ARMANDO J  
14565 N.W. 26TH AVENUE  
OPA LOCKA, FL 33054 US

## Name and Address of New Registered Agent:

PORTO, ARMANDO J  
P. O. BOX 8730  
CORAL SPRINGS, FL 33075 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: ARMANDO J. PORTO

08/23/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: PORTO, ARMANDO J  
Address: 14565 N.W. 26TH AVENUE  
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete  
Name: FEINSTEIN, PHILLIP  
Address: 14565 NW 26TH AVE.  
City-St-Zip: OPA LOCKA, FL 33054

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: PORTO, ARMANDO J  
Address: P. O. BOX 8730  
City-St-Zip: CORAL SPRINGS, FL 33075 US

Title: D (X) Change ( ) Addition  
Name: FEINSTEIN, PHILLIP  
Address: P. O. BOX 8730  
City-St-Zip: CORAL SPRINGS, FL 33075 US

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: ARMANDO J. PORTO

PTD

08/23/2005

Electronic Signature of Signing Officer or Director

Date