## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V38621

FILED Jan 23, 2007 Secretary of State

Entity Name: CONSERVART MASTER FRAME MAKERS AND ART CONSERVATORS, INC.

| Current P                                     | rincipal Plac                                             | e of Business:                  | New Principal Place                         | New Principal Place of Business:             |  |
|-----------------------------------------------|-----------------------------------------------------------|---------------------------------|---------------------------------------------|----------------------------------------------|--|
|                                               | LADES RD #1<br>TON, FL 3343                               |                                 |                                             |                                              |  |
| Current Mailing Address:                      |                                                           |                                 | New Mailing Address                         | New Mailing Address:                         |  |
|                                               | LADES RD #1<br>TON, FL 3343                               |                                 |                                             |                                              |  |
| FEI Number:                                   | : 65-0347530                                              | FEI Number Applied For()        | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |                                                           |                                 | Name and Address o                          | Name and Address of New Registered Agent:    |  |
| The above in the State                        | 28ŤH AVE<br>TON, FL 334:<br>named entity<br>e of Florida. |                                 | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUF                                      |                                                           | nic Signature of Registered Ag  | ent                                         | <br>Date                                     |  |
| Election Car                                  | npaign Financir                                           | ng Trust Fund Contribution ( ). |                                             |                                              |  |
| OFFICERS AND DIRECTORS:                       |                                                           |                                 | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SCHWARTZ,                                                 | ES RD, SUITE 16                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SCHWARTZ, I                                               | ES RD SUITE 16                  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |

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: LASZLO G SCHWARTZ D 01/23/2007