FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # V72679 (6)

1. Corporation Name
ARTISTIC CONTRACTING, INC.

Principal Place of Business	Mailing Address
2004 SW 36 TERRACE CAPE CORAL FL 33914	2004 SW 36 TERRACE CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 10/16/1992
3a. Date of Last Report: 01/21/1994
4. FEI Number: 65-0365935 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MANKE, JAMES E. 2004 SW 36 TERRACE CAPE CORAL FL 33914-4997	81 Name: MANKE, BEVERLY J 82 Street Address (P.O. Box Number is Not Acceptable): 2004 SW 36th Terr 83 ~~CAPE CORAL~~ 84 City: CAPE CORAL FL 85 Zip Code 33914

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE X ______ 3-10-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: P NAME: MANKE, JAMES E STREET ADDRESS: 2004 SW 36TH TERR CITY-ST-ZIP: CAPE CORAL FL	P. MANKE, BEVERLY J. 2004 SW 36th Terr. CAPE CORAL, FL 33914 ☒ Change ☐ Addition
TITLE: S NAME: MANKE, JAMES E STREET ADDRESS: 2004 SW 36TH TERR CITY-ST-ZIP: CAPE CORAL FL	S MANKE, BEVERLY J. 2004 SW 36th Terr. Cape Coral, FL 33914 ☒ Change ☐ Addition
TITLE: T NAME: MANKE, JAMES E STREET ADDRESS: 2004 SW 36TH TERR CITY-ST-ZIP: CAPE CORAL FL	T MANKE, BEVERLY J. 2004 SW 36th Terr. CAPE CORAL, FL 33914 ☒ Change ☐ Addition
TITLE: (CHAIRMAN OF THE BOARD) NAME: MD	CHAIRMAN, BOARD MANKE, JAMES E. 2004 SW 36th Terr. CAPE CORAL, FL 33914 ☐ Change ☒ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James E. Manke 3-10-95 813-542-0722
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0460837 FP