

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000118341

**Entity Name:** LEGACY ART STUDIO, INC.

**Current Principal Place of Business:**

207 S.W. 5TH STREET  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

207 S.W. 5TH STREET  
FORT LAUDERDALE, FL 33301

**FEI Number:** 20-1637693

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COMAS, NILDA  
207 SW 5 ST  
FT. LAUDERDALE, FL 33301-0000 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name COMAS, NILDA  
Address 207 SW 5 STREET  
City-State-Zip: FORT LAUDERDALE FL 33301

*I hereby 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 all other like empowered.*

**SIGNATURE:** NILDA COMAS

**PRESIDENT**

**03/19/2014**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date