

**2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000003473

**Entity Name:** ART CREATES US INC.**Current Principal Place of Business:**205 EAST 42ND STREET  
NEW YORK, NY 10017**Current Mailing Address:**20501 LIVERNOIS AVE  
#21463  
DETROIT, MI 48221 US**FEI Number:** 46-1518061**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEELE, DANIELLE  
1004 NE 118TH STREET  
BISCAYNE PARK, FL 33161 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:** DANIELLE STEELE

07/14/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                         |
|-----------------|-------------------------|
| Title           | CP                      |
| Name            | PEDI, AGOSTINA          |
| Address         | 247 WATER ST. SUITE 403 |
| City-State-Zip: | BROOKLYN NY 11201       |

|                 |                     |
|-----------------|---------------------|
| Title           | BOARD CHAIR/FOUNDER |
| Name            | ALPHONS, ADARSH     |
| Address         | 507 W 144, APT. 2   |
| City-State-Zip: | HARLEM NY 10031     |

|                 |                         |
|-----------------|-------------------------|
| Title           | S                       |
| Name            | HOVLAND, HEIDI          |
| Address         | 247 WATER ST. SUITE 403 |
| City-State-Zip: | BROOKLYN NY 11201       |

|                 |                      |
|-----------------|----------------------|
| Title           | EXECUTIVE DIRECTOR   |
| Name            | BARBARICS, KRISTEN   |
| Address         | 205 EAST 42ND STREET |
| City-State-Zip: | NEW YORK NY 10017    |

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KRISTEN BARBARICS**EXECUTIVE DIRECTOR**

07/14/2022

Electronic Signature of Signing Officer/Director Detail

Date