

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753293

FILED
Jan 04, 2011
Secretary of State

Entity Name: THE BAKEHOUSE ART COMPLEX, INC.

Current Principal Place of Business:

561 NW 32ND ST.
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

561 NW 32ND ST.
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-2104864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYMOND, ARLYS W
561 NW 32ND STREET
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: OXENBERG, HARVEY
Address: 2730 SW 3RD AVE, STE 303
City-St-Zip: MIAMI, FL 33129

Title: D
Name: CARRODEGUAS, VINCENT
Address: 2121 PONCE DE LEON BLVD., #1100
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: APFEL, ROBERT DDS
Address: 400 ARTHUR GODFREY RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: SPILLIS, PETER
Address: 5760 SW111 TER.
City-St-Zip: MIAMI, FL 33156

Title: S
Name: KRIPLEN, MARSH
Address: 1251 SW 20TH ST
City-St-Zip: MIAMI, FL 33145

Title: T
Name: LEVI, DIANA
Address: 2121 PONCE DE LEON, STE 1100
City-St-Zip: CORAL GABLES, FL 33134

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: ARLYS W. RAYMOND

ED

01/04/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date