2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008700

Entity Name: WINGS OVER MIAMI MUSEUM, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
14710 SW MIAMI, FL					
Current Mailing Address:			New Maili	New Mailing Address:	
14710 SW MIAMI, FL	128TH STREE 33196	ET			
FEI Number:	01-0624232	FEI Number Applied For ()	FEI Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
HOLLYWC	ÓMAT PARKV OOD, FL 33019 named entity s) US	rpose of changing it	ts registered office or registered agent, or both,	
in the State					
SIGNATUF		ic Signature of Registered Agen	†	Date	
OFFICERS	AND DIREC			S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		Delete IAM H TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DT () BATTLE, TIMOT 10061 S W 57 (PINECREST, FI	COURT	Title: Name: Address: City-St-Zip:	DT (X) Change () Addition BROWN, MACKAY B 7450 SW 131 STREET MIAMI, FL 33156	
Title: Name: Address: City-St-Zip:	D-VP () MONTIE, SUSAI 203 SUNRISE D KEY BISCAYNE	DRIVE #207	Title: Name: Address: City-St-Zip:	D-VP (X) Change () Addition HABER, DENNIS 8925 SW 148 STREET MIAMI, FL 33176	
Title: Name: Address: City-St-Zip:	DS () PLOUCHA, L.M. 1100 DIPLOMA HOLLYWOOD,	T PARKWAY	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CRISTOL, A. JA	/E CHAMBERS 1412	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BATTLE, TIMOTHY 10061 SW 57 COURT PINECREST, FL 33156	
Title: Name: Address: City-St-Zip:	D () BROWN, MACK 7450 SW 131S MIAMI, FL 331	T STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition CRISTOL, JAY A 51 SW FIRST AVENUE #1412 MIAMI, FL 33137	

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: L.M. PLOUCHA SEC 04/01/2009