

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004691

FILED  
May 30, 2007  
Secretary of State

**Entity Name:** PIRATE BAND PATRONS ASSOCIATION, INC.

**Current Principal Place of Business:**

ROBERT MORGAN EDUCATIONAL CENTER  
C/O BAND ROOM - 18180 SW 122 AVENUE  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

ROBERT MORGAN EDUCATIONAL CENTER  
C/O BAND ROOM - 18180 SW 122 AVENUE  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 56-2439986      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

VASALLO, PILAR  
4112 SW 98 AVENUE  
MIAMI, FL 33165      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

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: VASALLO, PILAR  
Address: 4112 SW 98 AVENUE  
City-St-Zip: MIAMI, FL 33165

Title: V      ( ) Delete  
Name: HURTADO, LISA  
Address: 15241 SW 158 ST  
City-St-Zip: MIAMI, FL 33187

Title: SD      ( ) Delete  
Name: JONES, ALICIA  
Address: 15480 SW 153 COURT  
City-St-Zip: MIAMI, FL 33187

Title: TD      ( ) Delete  
Name: MENDEZ, ELIA M  
Address: 15802 SW 85 ST  
City-St-Zip: MIAMI, FL 33193

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALICIA JONES

SEC

05/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date