2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N09000007395

To FILED

Jun 04, 2010

Secretary of State

Entity Name: AFRICAN HERITAGE CULTURAL ARTS CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

6161 N. W. 22ND AVENUE MIAMI, FL 33142

Current Mailing Address: New Mailing Address:

6161 N. W. 22ND AVENUE MIAMI, FL 33142

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

THOMPKINS, CHARLAYNE W 6161 N. W. 22ND AVENUE MIAMI, FL 33142 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: CHAI

Name: BLACK, JONATHAN R

Address: 14951 ROYAL OAKS LN, APT 1804

City-St-Zip: MIAMI, FL 33181

Title: VCHA

 Name:
 MUSTAFA, MELTON S

 Address:
 2820 N. W. 179 STREET

 City-St-Zip:
 MIAMI GARDENS, FL 33056

Title: SEC

Name: LOCKHART, CAROLINE Address: 3091 THAMES WAY City-St-Zip: MIRAMAR, FL 33025

Title: TREA

Name: THOMPKINS, CHARLAYNE W Address: 20001 N. W. 63RD AVENUE

City-St-Zip: MIAMI, FL 33015

Title: MEM

Name: RUSH, JAMES A
Address: 6651 COW PIN ROAD
City-St-Zip: MIAMI LAKES, FL 33016

Title: BD M

 Name:
 LEWIS, PAUL V

 Address:
 10355 S. W. 9TH LANE

 City-St-Zip:
 PEMBROKE PINES, FL 33025

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: CHARLAYNE W. THOMPKINS TREA 06/04/2010