

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43479

FILED
Jul 17, 2009
Secretary of State

Entity Name: MID EASTERN DANCE EXCHANGE, INC.

Current Principal Place of Business:

1725 JAMES AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1725 JAMES AVE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0211076 **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:

MADERA, TIFFANY
1725 JAMES AVE #19
MIAMI BEACH, FL 33139 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: P () Delete
Name: MADERA, TIFFANY
Address: 1725 JAMES AVE
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: HOAGLAND, HALCGONE
Address: 505 NE 30TH ST #405
City-St-Zip: MIAMI, FL 33137

Title: T () Delete
Name: OLIVER, MANAL
Address: 1666 KENNEDY CAUSEWAY #308
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: S () Delete
Name: COSMO, SHERI
Address: 3151 SHERIDAN AVE
City-St-Zip: MIAMI BEACH, FL 33140

Title: M () Delete
Name: ELHADDAD, AMMAL
Address: 7555 W 2ND CT
City-St-Zip: HIALEAH, FL 33014

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:

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: TIFFANY MADERA

PRES

07/17/2009

Electronic Signature of Signing Officer or Director

Date