

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004294

Entity Name: MULTI EDUCATIONAL CULTURAL CENTER OF THE ARTS, INC.**Current Principal Place of Business:**1610 N. HAYNE ST.
PENSACOLA, FL 32503**Current Mailing Address:**P. O. BOX 7711
ESSEX, MD 21221 US**FEI Number:** 59-3658065**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SABREE, RACHEL M EXE DIR
1610 N. HAYNE ST.
PENSACOLA, FL 32503 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:** RACHEL M. SABREE I

03/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	SABREE, RACHEL MEXE DIR
Address	1610 N. HAYNE ST.
City-State-Zip:	PENSACOLA FL 32503

Title	D
Name	DIALLO, PASHA SD DIR
Address	2031 PAULETTE RD 204
City-State-Zip:	DUNDALK MD 21222

Title	D
Name	FERNANDEZ, AMIN AEX SEC
Address	2011 BEAR RIDGE RD. APT. #2
City-State-Zip:	DUNDALK MD 21222

Title	D
Name	FRANCE, NADIRA ATREAS
Address	717 WEST KINGSWAY
City-State-Zip:	ESSEX MD 21220

Title	D
Name	MCKINNON, LEE O.
Address	2180 PLEASANT HILL RD SUITE A- 5,PMB
City-State-Zip:	DULUTH GA 30096

Title	DIRECTOR
Name	HARRIS, RAY-PAULA
Address	P.O. BOX 842
City-State-Zip:	CORDOVA TN 38088

Title	DIRECTOR
Name	MABRY, PREZEL
Address	#9 HICKORY RIDGE CT.
City-State-Zip:	CATONVILLE MD 21228

Title	DIRECTOR
Name	MABRY, CHRYSTAL LYNN
Address	5124 YELLOWWOOD AVENUE
City-State-Zip:	BALTIMORE MD 21209

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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: RACHEL M SABREECEO/EXECUTIVE
DIRECTOR

03/07/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	OFFICER
Name	SABREE, MUHAMMAD ALI
Address	2011 BEAR RIDGE RD. #2
City-State-Zip:	DUNDALK MD 21222