

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000011604

**Entity Name:** JAZZ ARCHIVE, INC.

**Current Principal Place of Business:**

6502 SW 114 AVE.  
MIAMI, FL 33173

**Current Mailing Address:**

6502 SW 114 AVE.  
MIAMI, FL 33173 US

**FEI Number: 45-4075343**

**Certificate of Status Desired: No**

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

OUSLEY, LARRY JJR  
6502 SW 114 AVE.  
MIAMI, FL 33173 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

**Officer/Director Detail :**

Title P  
Name CAMPBELL, PETER  
Address 6103 AUQA AVE  
City-State-Zip: MIAMI BEACH FL 33141

Title D  
Name GASIOR, JIM  
Address 6501 SW 48TH ST  
City-State-Zip: MIAMI FL 33155

Title D  
Name HENRY, NICOLE  
Address PO BOX 192011  
City-State-Zip: MIAMI FL 33119

Title S  
Name FIELDS, TRACY A  
Address PO BOX 611754  
City-State-Zip: N MIAMI FL 33261

Title T  
Name SAIENTZ, GABRIEL  
Address 860 SW 118 TERRACE  
City-State-Zip: DAVIE FL 33325

Title D  
Name SMOLLER, LOUIS  
Address 15 NORTHEAST 13TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33301

*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: GABRIEL SAIENTZ**

**DIRECTOR**

**01/14/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date