

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44566

Entity Name: PERFORMING ARTS CENTER TRUST, INC.**Current Principal Place of Business:**1300 BISCAYNE BOULEVARD
MIAMI, FL 33132**Current Mailing Address:**1300 BISCAYNE BOULEVARD
MIAMI, FL 33132 US**FEI Number:** 65-0353695**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BURNETT, JOHN
1300 BISCAYNE BOULEVARD
MIAMI, FL 33132 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:** JOHN BURNETT

04/01/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	IPC
Name	ARRIOLA, J. RICKY
Address	1395 NW 58 COURT
City-State-Zip:	MIAMI LAKES FL 33014

Title	T
Name	SHEER, EMERY
Address	2525 PONCE DE LEON BLVD, 5TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

Title	S
Name	HERRON, JAMES
Address	1401 BRICKELL AVE., STE 825
City-State-Zip:	MIAMI FL 33130

Title	C
Name	EIDSON, MIKE
Address	255 ARAGON
City-State-Zip:	CORAL GABLES FL 33134

Title	AT
Name	FEIN, ALAN
Address	150 W. FLAGLER ST, STE 2200
City-State-Zip:	MIAMI FL 33130

Title	AS
Name	THURER, PENNY
Address	1019 CASTILE AVE.
City-State-Zip:	CORAL GABLES FL 33134

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: JAMES HERRON**SECRETARY**

04/01/2013

Electronic Signature of Signing Officer/Director Detail

Date