# 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PD

#### SIGNATURE: PHILANA DIEM

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P11000093378

Entity Name: DIEM SCHOOL OF THE PERFORMING ARTS, INC.

### Current Principal Place of Business:

16570 NE 26TH AVE. APT #6G NORTH MIAMI BEACH, FL 33160

#### **Current Mailing Address:**

PO BOX 612001 NORTH MIAMI, FL 33261

## FEI Number: 45-3677025

### Name and Address of Current Registered Agent:

DIEM, PHILANA 16570 NE 26TH AVE. APT #6G NORTH MIAMI BEACH, FL 33160 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

### Officer/Director Detail :

TitlePDNameDIEM, PHILANAAddress16570 NE 26TH AVE., APT #6GCity-State-Zip:NORTH MIAMI BEACH FL 33160

FILED Feb 11, 2014 Secretary of State CC5396007194

Certificate of Status Desired: No

Date