

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 19, 2009  
Secretary of State**

DOCUMENT# 737323

Entity Name: M ENSEMBLE COMPANY

**Current Principal Place of Business:**

**New Principal Place of Business:**

12320 W DIXIE HWY  
NORTH MIAMI, FL 33161 US

**Current Mailing Address:**

**New Mailing Address:**

P.O BOX 1175  
MIAMI, FL 33168

FEI Number: 59-1773348      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

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

RICHARDSON, SHIRLEY  
11203 NE 10TH AVENUE  
MIAMI, FL 33161 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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SCHWALM LAWHORN, PAMELA E  
Address: 1170 NE 143RD STREET  
City-St-Zip: NORTH MIAMI, FL 33161

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD ( ) Delete  
Name: WILLIAMS, RUTH  
Address: 19501 EAST COUNTRY DRIVE BLDG 9, #408  
City-St-Zip: AVENTURA, FL 33180

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: RICHARDSON, SHIRLEY  
Address: 11203 NE 10TH AVENUE  
City-St-Zip: MIAMI, FL 33161

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: WILLIAMS, PATRICIA E  
Address: P.O. BOX 680923  
City-St-Zip: MIAMI, FL 33168

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: SHIRLEY RICHARDSON

D

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date