## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000003550

FILED Apr 30, 2008 Secretary of State

Entity Name: MAJESTIC'S YOUTH & ARTS ACADEMY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1121 ATLANTIC AVENUE OPA-LOCKA FL33054 **Current Mailing Address: New Mailing Address:** 1121 ATLANTIC AVENUE OPA-LOCKA FL33054 FEI Number: 65-1034738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SLOAN-SIMPKINS, PHYLLIS W 1121 ATLANTIC AVÉNUE OPA-LOCKA, FL33054 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: CEO () Delete () Change () Addition SIMPKINS, PHYLLIS W Name: Name: Address: Address: 1121 ATLANTIC AVENUE City-St-Zip: City-St-Zip: OPA-LOCKA, FL 33054 Title: () Delete Title: () Change () Addition SIMPKINS, PHYLLIS W Name: Name: Address: 1121 ATLANTIC AVENUE Address: City-St-Zip: City-St-Zip: OPA-LOCKA FL33054 Title: () Delete Title: () Change () Addition REESE, JOHN Name: Name: Address: 1034 NW 51ST STREET Address: City-St-Zip: MIAMI, FL 33127 City-St-Zip: Title: PR ( ) Delete Title: () Change () Addition Name: WILLIAMS, CANDI Name: Address: 4370 NW 170TH ST. Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: Title: () Delete Title: () Change () Addition BOSTIC, URETHA L Name: Name: 1496 APRIL AVE. Address: Address: DELTONA, FL 32725 City-St-Zip: 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: PHYLLIS SLOAN-SIMPKINS CEO 04/30/2008