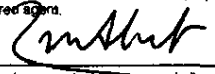
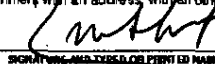


FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91201 033 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N00000004826			20032134
1. Entity Name COMMUNITY PERFORMING ARTS FOUNDATION CORP.			
Principal Place of Business 2800 W 84ST SUITE 3 HIALEAH, FL 33018		Mailing Address 2800 W 84ST SUITE 3 HIALEAH, FL 33018	
2. Principal Place of Business 2800 W 84ST Suite, Apt. #, etc. Suite 1 City & State Hialeah, FL Zip 33018		3. Mailing Address 2800 W 84ST Suite, Apt. #, etc. Suite 1 City & State Hialeah, FL Zip 33018	
Country USA		Country USA	
4. FEI Number 65-1026594		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RIMER, IRENE 2800 W 84 STREET SUITE 3 HIALEAH, FL 33014		7. Name and Address of New Registered Agent Name IRENE ALBERT Street Address (P.O. Box Number is Not Acceptable) 2800 W 84ST Suite 1 City Hialeah, FL Zip Code 33018	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 4/17/3 (NOTE: Registered Agent signature required when registering)			
FILE NOW - FEES \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D RIMER, IRENE 2800 W 84 ST., STE. 3 HIALEAH, FL 33018 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP DIP/TIS IRENE ALBERT 2800 W 84ST Suite 1 Hialeah, FL 33018 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D MARTIN, MARIA G 5911 W 18 LANE HIALEAH, FL 33012 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D RIMER, DEBORAH 1870 W. 84 ST. HIALEAH, FL 33014 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP D MICHAEL G. ALBERT 2800 W 84ST Suite 1 Hialeah, FL 33018 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE:  DATE 4/17/3 (305) 823-1180 SIGNATURE AND TITLE OF PERSONED NAME OF SIGNING OFFICER OR DIRECTOR			