

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005660

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: AFRICAN WORLD ARTISTS COLLECTIVE, INC.

**Current Principal Place of Business:**

1001 SW 39 AVENUE  
FORT LAUDERDALE, FL 33312 US

**New Principal Place of Business:**

**Current Mailing Address:**

1001 SW 39 AVENUE  
FORT LAUDERDALE, FL 33312 US

**New Mailing Address:**

FEI Number: 22-3850656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMPSON, ANTHONY R  
1001 SW 39 AVENUE  
FORT LAUDERDALE, FL 33312 US

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

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:**

Title: PD ( ) Delete  
Name: THOMPSON, ANTHONY R  
Address: 1001 SW 39 AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: VD ( ) Delete  
Name: ODIBI, JOHNSON  
Address: 3273 NW 181ST STREET  
City-St-Zip: CAROL CITY, FL 33056 US

Title: SD ( ) Delete  
Name: ONIWOSAN, NZINGAH  
Address: 12277 COLONY PRESERVE DR  
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: TD ( ) Delete  
Name: HARNETT, TRSHEMA  
Address: 9170 NW 19TH PLACE  
City-St-Zip: SUNRISE, FL 33322 US

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

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

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

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

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: ANTHONY R. THOMPSON

PD

04/23/2007

Electronic Signature of Signing Officer or Director

Date