

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000006367

FILED  
Sep 10, 2003  
Secretary of State

**Entity Name:** AFRICAN AMERICAN PERFORMING ARTS COMMUNITY THEATRE, INC.

**Current Principal Place of Business:**

1832 N W 59TH STREET  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 472451  
MIAMI, FL 332472451

**New Mailing Address:**

FEI Number: 65-1137565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRELL, THEODORE R JR.  
1832 N W 59TH STREET  
MIAMI, FL 33142 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: T ( ) Delete  
Name: PRYOR, JOHN  
Address: 1905 N W 171ST STREET  
City-St-Zip: MIAMI, FL 33056

Title: D ( ) Delete  
Name: HARRELL, THEODORE R JR.  
Address: 1832 N W 59TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: T ( ) Delete  
Name: GAINEY, ANDRE L  
Address: 1221 N W 33RD STREET  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: T (X) Change ( ) Addition  
Name: MCMATH, TRELANY L  
Address: 5821 NW 7TH AVENUE APT. 500  
City-St-Zip: MIAMI, FL 33127

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

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

Title: T ( ) Change (X) Addition  
Name: SKALET, KRISTOFF  
Address: 1832 NW 59TH STREET  
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THEODORE HARRELL, JR

D

09/10/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date