2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007475

LINKIN, BARRY

8205 SW 98 COURT

MIAMI, FL 33173

Name:

Address:

City-St-Zip:

Entity Name: CRAYON INSTITUTE OF THE ARTS, INC.

FILED May 21, 2003 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 8205 SW 98 COURT MIAMI, FL 33173 **Current Mailing Address: New Mailing Address:** 8205 SW 98 COURT MIAMI, FL 33173 FEI Number: 65-1148458 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: GAYTON, NELSON 8205 SW 98 CT MIAMI, FL 33173 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: EDD () Delete () Change () Addition OJLAR, MICHELLE Name: Name: Address: 8205 SW 98 COURT Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: Title: Title: () Delete () Change () Addition BARR, DONALD Name: Name: Address: 8205 SW 98 COURT Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHELLE OSLAR ED 05/21/2003