2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008607

Entity Name: BALLET GAMONET INC.

FILED May 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 600 N.E. 97TH STREET MIAMI SHORES, FL 33138 **Current Mailing Address: New Mailing Address:** 600 N.E. 97TH STREET MIAMI SHORES, FL 33138 FEI Number: 36-4486273 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: GAMONET, JIMMY 600 N.E. 97TH STREET MIAMI SHORES, FL 33138 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: (X) Change () Addition HAFT, JAY WESTBROOK, HUGH Name: Name: Address: 10 EDGEWATER DRIVE, UNIT 10A Address: 158 SOUTH PROSPECT DR. City-St-Zip: CORAL GABLES, FL 33133 City-St-Zip: CORAL GABLES, FL 33133 Title: Title: (X) Change () Addition () Delete Name: CURTIS, ARTHUR Name: PERWIN, JEAN Address: 2501 LUCERNE AVENUE. SUNSET ISLAND 2 Address: 25 S.E. SECOND AVENUE SUITE 1144 City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI, FL 33131 Title: () Delete Title: () Change () Addition SINGER, BARBARA Name: Name: 800 WEST AVENUE #712 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: () Delete (X) Change () Addition Title: Title: ROSELLINE, SUSAN Name: Name: ROSELLINI, SUSAN 201 CRANDON BLVD. STE# TH61 Address: Address: 201 CRANDON BLVD. STE# TH61 City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149 Title: () Delete Title: () Change () Addition LUKIS, SYLVESTER Name: Name: 3663 SOUTHWEST 8TH STREET STE #204-B Address: Address: City-St-Zip: MIAMI., FL 33135 City-St-Zip: Title: () Delete Title: () Change (X) Addition SHIELDS, CAROLE Name: Name: Address: Address: 158 SOUTH PROSPECT DR. CORAL GABLES, FL 33133 City-St-Zip: City-St-Zip:

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: SUSAN ROSELLINI D 05/05/2004