

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006098

FILED
Jan 09, 2007
Secretary of State

Entity Name: PROYECTO ARTE ACTUAL INC.

Current Principal Place of Business:

THE MOORE SPACE
4040 NE 2ND AVE 2ND FLOOR
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

THE MOORE SPACE
4040 NE 2ND AVE 2ND FLOOR
MIAMI, FL 33137

New Mailing Address:

FEI Number: 82-0563692 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 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: D () Delete
Name: CUBINA, SILVIA KARMAN
Address: 10301 SW 89TH AVE
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: DE LA CRUZ, ROSA
Address: 5 HARBOR POINT
City-St-Zip: KEY BISCAINE, FL 33149

Title: D () Delete
Name: ROBINS, CRAIG
Address: 180 NE 40TH STREET
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: DELGADO, CRISTINA
Address: 42 REMSEN ST
City-St-Zip: BROOKLYN, NY 00901

Title: D () Delete
Name: ERNST, ISABEL
Address: 3905 MANSION CT , NW
City-St-Zip: WASHINGTON, DC 20007

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DE LA CRUZ, ROSA MRS.
Address: 5 HARBOR POINTE
City-St-Zip: KEY BISCAINE, FL 33149

Title: D (X) Change () Addition
Name: ERNST, ISABEL MRS.
Address: 3905 MANSION COURT, NW
City-St-Zip: WASHINGTON, DC 20007

Title: D (X) Change () Addition
Name: ROBINS, CRAIG MR.
Address: 3841 NE 2ND AVENUE, 4TH FLOOR
City-St-Zip: MIAMI, FL 33137

Title: D (X) Change () Addition
Name: DELGADO, CRISTINA MRS.
Address: 42 REMSEN ST
City-St-Zip: BROOKLYN, NY 00901

Title: D (X) Change () Addition
Name: CUBINA, SILVIA
Address: 538 ZAMORA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the 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: SILVIA K CUBINA

D

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date