

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000878

FILED
Apr 18, 2005
Secretary of State

Entity Name: ARTS CULTURAL MOVEMENT FOUNDATION, INC.

Current Principal Place of Business:

600 NE 14TH ST., STE. 1402
MIAMI, FL 33137

New Principal Place of Business:

1938 NE 149TH STREET
NORTH MIAMI, FL 33181

Current Mailing Address:

600 NE 14TH ST., STE. 1402
MIAMI, FL 33137

New Mailing Address:

1938 NE 149TH STREET
NORTH MIAMI, FL 33181

FEI Number: 75-3054623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINS, ANTONIO
600 NE 14TH ST., STE. 1402
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

MARTINS, ANTONIO
2041 NE 211 STREET
MIAMI, FL 33179 US

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:

04/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MARTINS, ANTONIO
Address: 600 NE 14TH ST., STE. 1402
City-St-Zip: MIAMI, FL 33137

Title: VD () Delete
Name: MARTINS, ANA
Address: 600 NE 14TH ST., STE. 1402
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: FRANCA, FABIO
Address: 600 NE 14TH ST., STE. 1402
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: FONTENELLE, HUMBERTO
Address: 6991 NW 82ND AVE #3
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MARTINS, ANTONIO
Address: 2041 NE 211 STREET
City-St-Zip: MIAMI, FL 33179

Title: VD (X) Change () Addition
Name: MARTINS, ANA
Address: 2041 NE 211 STREET
City-St-Zip: MIAMI, FL 33179

Title: SD (X) Change () Addition
Name: FRANCA, FABIO
Address: 2041 NE 211 STREET
City-St-Zip: MIAMI, FL 33179

Title: () Change () Addition
Name:
Address:
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: ANA MARTINS

VD

04/18/2005

Electronic Signature of Signing Officer or Director

Date