

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003852

FILED
Mar 02, 2009
Secretary of State

Entity Name: PIAG MUSEUM INC.

Current Principal Place of Business:

2724 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2724 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 54-2113815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ-POWER, MIREYA
9600 SW. 159TH AVENIDA
MIAMI, FL 33196 US

Name and Address of New Registered Agent:

PEREZ-POWER, MIREYA
9600 SW. 159TH AVENUE
MIAMI, FL 33196 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:

03/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEREZ-POWER, MIREYA
Address: 9600 SW. 159TH AVENIDA
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: TRUJILLO, CARMEN P.B.
Address: 6705 BUTTERMERE LANE
City-St-Zip: BETHESDA, MS 20817

Title: D () Delete
Name: POWER, WILLIAM
Address: 9600 SW. 159TH AVENIDA
City-St-Zip: MIAMI, FL 33196

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEREZ-POWER, MIREYA
Address: 9600 SW. 159TH AVENUE
City-St-Zip: MIAMI, FL 33196

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

Title: VPT (X) Change () Addition
Name: POWER JR, WILLIAM
Address: 15955 SW 98 ST.
City-St-Zip: MIAMI, FL 33196

Title: VP 2 () Change (X) Addition
Name: TODD, ELISA
Address: 10315 NW 9 ST. CR # 505
City-St-Zip: MIAMI, FL 33172

Title: VP3 () Change (X) Addition
Name: MENDOZA -VERDE, SANDRA
Address: 20911 LEEWARD CT #241
City-St-Zip: AVENTURA, FL 33180

I hereby certify that the information supplied with this filing does not qualify 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: MIREYA PEREZ- POWER

P

03/02/2009

Electronic Signature of Signing Officer or Director

Date