2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005708

Entity Name: BRAZILIAN CULTURAL ARTS EXCHANGE INC.

FILED May 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

601 S. MAIN ST. 3930 NE 15TH STREET

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32609 US

Current Mailing Address: New Mailing Address:

601 S. MAIN ST. 3930 NE 15TH STREET

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32609 US

FEI Number: 20-0104769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LESTER, NICHOLS E PRESIDE GREEN, AIMEE B ED 601 S. MAIN ST. 2511 NE 5TH PL

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32641 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: AIMEE GREEN 05/25/2009

Electronic Signature of Registered Agent Date

Electronic dignature of Registered Agen

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: EXDR () Delete Title: ED (X) Change () Addition

 Name:
 AIMEE, GREEN B
 Name:
 AIMEE, GREEN B

 Address:
 747 SE 2ND PL. #8
 Address:
 2511 NE 5TH PL

City-St-Zip: GAINESVILLE, FL 32601 US City-St-Zip: GAINESVILLE, FL 32641 US

Title: P () Delete Title: P (X) Change () Addition

 Name:
 NICHOLS, LESTER
 Name:
 PORTO, WELLINGTON

 Address:
 PO BOX 1116
 Address:
 2511 NE 5TH PL

City-St-Zip: GAINESVILLE, FL 32602 US City-St-Zip: GAINESVILLE, FL 32641 US

Title: VP () Delete Title: VP (X) Change () Addition Name: PORTO, WELLINGTON Name: DAVIS, JEFFRY

 Name:
 PORTO, WELLINGTON
 Name:
 DAVIS, JEFFRY

 Address:
 747 SE 2ND PLACE #8
 Address:
 3930 NE 15TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32601 US
 City-St-Zip:
 GAINESVILLE, FL 32609 US

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 BYAM, GABRIELLE S
 Name:
 POWERS, CATHERINE

 Address:
 1414 NW 7TH ST
 Address:
 3930 NE 15TH STREET

City-St-Zip: GAINESVILLE, FL 32601 US City-St-Zip: GAINESVILLE, FL 32609 US

Title: TRES () Delete Title: TRES (X) Change () Addition Name: ROBBINS, TAMARA Name: ROBBINS, TAMARA

 Name:
 ROBBINS, TAMARA
 Name:
 ROBBINS, TAMARA

 Address:
 601 S. MAIN ST
 Address:
 3930 NE 15TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32601 US
 City-St-Zip:
 GAINESVILLE, FL 32609 US

Title: () Delete Title: BM () Change (X) Addition

 Name:
 Name:
 BYAM, GABRIELLE

 Address:
 Address:
 3930 NE 15TH STREET

 City-St-Zip:
 City-St-Zip:
 GAINESVILLE, FL 32609 US

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: AIMEE GREEN ED 05/25/2009