

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007990

FILED
May 12, 2007
Secretary of State

Entity Name: JUBILEE DANCE THEATRE, INC.

Current Principal Place of Business:

2840 SW 5TH ST
FT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

PO BOX 120115
FT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 30-0209372 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

WELTERS, LUCTRICIA T
2840 SW 5TH ST
FT LAUDERDALE, FL 33312 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WELTERS, LUCTRICIA
Address: 2840 SW 5TH ST
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VP () Delete
Name: CARTER-PEREIRA, CLAUDINE
Address: 1854 TAMARIND LANE
City-St-Zip: COCONUT CREEK, FL 33063

Title: S () Delete
Name: NOBLES, SANDRA
Address: 2840 SW 5TH ST
City-St-Zip: FT LAUDERDALE, FL 33312

Title: T () Delete
Name: SHAW, REVELL
Address: 1360 SE 14TH ST
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: O () Delete
Name: ARTWELL, SONIA
Address: 2840 SW 5TH ST
City-St-Zip: FT LAUDERDALE, FL 33312

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: O (X) Change () Addition
Name: HAMMOND, JACQUELINE
Address: 2840 SW 5TH ST
City-St-Zip: FT LAUDERDALE, FL 33312

Title: O () Change (X) Addition
Name: THOMPSON, TONY
Address: 2840 SW 5TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33312

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: LUCTRICIA T. WELTERS

PRES

05/12/2007

Electronic Signature of Signing Officer or Director

Date