2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2007
Secretary of State

DOCUMENT# N03000008417

Entity Name: MULTICULTURAL ARTS AND EDUCATION SOCIETY, INC.

Current Principal Place of Business:

11800 N.W. 2ND STREET
MIAMI, FL 33182 US

New Principal Place of Business:

Current Mailing Address:

6927 S.W. 115TH PLACE
A-38
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 41-2110490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REID, ANTHONY F
11800 N.W. 2ND STREET
MIAMI, FL 33182 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: P ( ) Delete
Name: CONCEPCION, REGLA
Address: 11522 S.W. 3RD STREET
City-St-Zip: MIAMI, FL 33182 US

Title: VP ( ) Delete
Name: ORDAX, DORA
Address: 140 N.W. 123RD AVENUE
City-St-Zip: MIAMI, FL 33182 US

Title: S ( ) Delete
Name: BORREGO, ORFILIO
Address: 13211 N.W. 5TH TERRACE
City-St-Zip: MIAMI, FL 33182 US

Title: D ( ) Delete
Name: REID, ANTHONY F
Address: 6927 SW 115TH PLACE UNIT A-38
City-St-Zip: MIAMI, FL 33173 US

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:

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: ANTHONY REID D 04/22/2007

Electronic Signature of Signing Officer or Director — Date