

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008607

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: ARTS4LIVING CORPORATION

## Current Principal Place of Business:

6043 SW 34TH STREET  
MIAMI, FL 33155

## New Principal Place of Business:

1538 NW 159TH AVENUE  
PEMBROKE PINES, FL 33028

## Current Mailing Address:

6043 SW 34TH STREET  
MIAMI, FL 33155

## New Mailing Address:

1538 NW 159TH AVENUE  
PEMBROKE PINES, FL 33028

FEI Number: 81-0634475

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPEZ-TORRES, MIRTA  
1538 NW 159 AVENUE  
PEMBROKE PINES, FL 33025 US

## Name and Address of New Registered Agent:

LOPEZ-TORRES, MIRTA  
1538 NW 159 AVENUE  
PEMBROKE PINES, FL 33028 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: MIRTA LOPEZ-TORRES

04/26/2004

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LOPEZ-TORRES, MIRTA  
Address: 1538 NW 159TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: TORRES, MANUEL  
Address: 1538 NE 159TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: CASAL, JOSE  
Address: 6043 SW 34TH STREET  
City-St-Zip: MIAMI, FL 33135

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

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: D (X) Change ( ) Addition  
Name: DIAZ, JORGE  
Address: 611 FOREST DRIVE APT 219  
City-St-Zip: MIAMI SPRING, FL 33166

Title: D ( ) Change (X) Addition  
Name: CUELLAR, SHEILA  
Address: 10655 SW 113 PLACE #D  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Change (X) Addition  
Name: PENA, ADA  
Address: 1535 BIARRITZ DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

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: MANUEL TORRES

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date