

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009477

FILED
Apr 27, 2006
Secretary of State

Entity Name: MIART FOUNDATION, INC.

Current Principal Place of Business:

32 NE 39TH STREET
MIAMI, FL 33137

New Principal Place of Business:

2441 NW 2ND AVE
MIAMI, FL 33127

Current Mailing Address:

32 NE 39TH STREET
MIAMI, FL 33137

New Mailing Address:

2441 NW 2ND AVE
MIAMI, FL 33127

FEI Number: 20-1125795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRUBEL, DAVID L
560 LINCOLN ROAD
SUITE 304
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

LONG, DOROTHY I
2441 NW 2ND AVE
MIAMI, FL 33127 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: DOROTHY I LONG

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAMIAN, CAROL
Address: 1115 N. GREENWAY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

Title: VD () Delete
Name: LONG, DOROTHY
Address: 1009 S.E. 7TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: SD () Delete
Name: VINOLY, DANIEL
Address: 2450 S.W. 23RD AVENUE
City-St-Zip: MIAMI, FL 33145

Title: TD (X) Delete
Name: MONAGLE, JOSEPH T III
Address: 200 S. BISCAYNE BLVD., SUITE 4500
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LONG, DOROTHY
Address: 2441 NW 2ND AVE
City-St-Zip: MIAMI, FL 33127

Title: VP (X) Change () Addition
Name: BLACK, STEPHANIE
Address: ONE SE THIRD AVE, SUITE 1940
City-St-Zip: MIAMI, FL 33131

Title: VP (X) Change () Addition
Name: OROFINO, SAL
Address: ONE SE THIRD AVE, SUITE 1940
City-St-Zip: MIAMI, FL 33131

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: DOROTHY I LONG

PD

04/27/2006

Electronic Signature of Signing Officer or Director

Date