

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004411

FILED
Feb 08, 2006
Secretary of State

Entity Name: MIAMI BEACH ART DECO WEEKEND, INC.

Current Principal Place of Business:

1001 OCEAN DRIVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

PO BOX 190180
MIAMI BEACH, FL 33119

New Mailing Address:

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

Name and Address of Current Registered Agent:

PERWIN, JEAN
25 SE 2ND. AVE SUITE #1144
MIAMI, FL 33131 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: C () Delete
Name: DUNLOP, BETH
Address: 5851 NORTH BAY ROAD
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VC () Delete
Name: PYNES, STEVE
Address: 4581 POST AVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VC () Delete
Name: CHASE, BARRY
Address: 4775 COLLIND AVE APT #601
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VC () Delete
Name: PERWIN, JEAN
Address: 25 SE 2ND. AVE SUITE#1144
City-St-Zip: MIAMI, FL 33131 US

Title: T () Delete
Name: OLIVER, MANAL
Address: 3121 SHERIDAN AVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: S () Delete
Name: SOLERA, LOURDES
Address: 13620 SW 102 COURT
City-St-Zip: MIAMI, FL 33176 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:

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City-St-Zip:

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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: BETH DUNLOP

C

02/08/2006

Electronic Signature of Signing Officer or Director

Date