2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004411

Entity Name: MIAMI BEACH ART DECO WEEKEND, INC.

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1001 OCEAN DRIVE 1130 WASHINGTON AVE GROUND FLOOR

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

PO BOX 190180 PO BOX 190180

MIAMI BEACH, FL 33119 MIAMI BEACH, FL 331190180 US

FEI Number: 59-1788634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERWIN, JEAN 25 SE 2ND. AVE SUITE #1144 MIAMI, FL 33131

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DOWNS, DIANE CHASE, BARRY Name: Name:

Address: 1521 ALTON ROAD #804 Address: 4775 COLLINS AVE #601 City-St-Zip: MIAMI BEACH, FL 33139 US City-St-Zip: MIAMI BEACH, FL 33139 US

Title: Title: () Delete () Change () Addition

Name: PYNES, STEVE Name: Address: 4581 POST AVE Address: MIAMI BEACH, FL 33140 US City-St-Zip: City-St-Zip:

Title: VC. () Delete Title: () Change () Addition

HOLLAND, ERIC Name: Name: 616-47 STREET Address: Address:

City-St-Zip: MIAMI BEACH, FL 33140 US City-St-Zip:

Title: VC () Delete Title: () Change () Addition

MARCUS, ARTHUR Name: Name: 1450 LINCOLN ROAKD #866 Address: Address: MIAMI BEACH, FL 33139 US City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition

BACHAY, JOHN Name: Name: 9328 NE 9 AVE. Address: Address: MIAMI SHORES, FL 33138 US City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change (X) Addition

DUNLOP, BETH Name: Name:

Address: Address: 5851 NORTH BAY ROAD MIAMI BEACH, FL 33140 US City-St-Zip: City-St-Zip:

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: MARIE HERNANDEZ E/D 04/08/2009