

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001603

FILED
Jan 16, 2009
Secretary of State

Entity Name: JLM ARTS, INC.

Current Principal Place of Business:

1000 NORTHEAST 89 STREET
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

1000 NORTHEAST 89 STREET
MIAMI, FL 33138

New Mailing Address:

FEI Number: 20-2342041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

IACINO, RICHARD
1000 NORTHEAST 89 STREET
MIAMI, FL 33138 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: PD () Delete
Name: MOREJON, JORGE LUIS
Address: 1000 NE 89 STREET
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: IACINO, RICHARD
Address: 1000 NORTHEAST 89 STREET
City-St-Zip: MIAMI, FL 33138

Title: D () Delete
Name: BENITEZ, EMELINA
Address: 120 SOUTHWEST 64 COURT
City-St-Zip: MIAMI, FL 33144

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:

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: RICHARD A. IACINO

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date