## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-27-2006-90171<u>-</u>026,\*\*\*\*61.25 N0500001<sup>1</sup>1842

2006 SEP -5 AM 11: 48

DOCUMENT # N05000011842  1. Entry Name  VIE & ART CULTURAL CENTER, INC.				-	SECRETAKY ALLAHASSEI	Jr sī E. FLO	AIL IRIDA	
Principal Place of Business 441 NORTHEAST 195TH STREET APT. 304 NORTH MIAMI BEACH, FL 33179		Mailing Address 441 NORTHEAST 195TH STREET APT. 304 NORTH MIAM! BEACH, FL 33179						
2. Principal Place of Business		3. Mailing Address			1851 (1918 1861) (1855) (1918 1881			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04212006 Chg-l	NP CR2E037			
City & State		City & State		4. FEI Number			oplied For ht Applicable	
Zip	Country	Zip	Country	5. Certificate of Status	Dezileo     F	8.75 Add ee Required		
	6. Name and Address of Current F	legistered Agent	Alama	7. Name and Address	of New Registered Ap	gent		
VIARD, EMILE M 441 NORTHEAST 195TH STREET APT, 304			Name Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
	IIAMI BEACH, FL 33179				-			
			City	FL Zip Code			9	
	e named entity submits this statement for tions of registered agent.	the purpose of changing its	agistared office or regis	sterad agent, or both, in the	State of Florida. I am fa	milier with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agent to	nd title if applicable. (NOTE:	Registered Agent aignizure requ	uired when reiness(mg)	DATE			
SIGNATORE		9. Election Cern Trust Fund Co	paign Financing	\$5.00 May Be	Make check			
10.	Species private remain of regulated species Filling Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIR	Election Carn     Trust Fund Carn ECTORS	paign Financing	\$5.00 May Be	Make check; Florida Departs	nent of St	10	
	Species print rame of registered species Filling Fee is \$61.25 Due by May 1, 2006	9. Election Cam Trust Fund Co  ECTORS  Detets  T, APT. 304	npaign Financing ontribution.	\$5.00 May Be Added to Fees	Make checky Florida Departs O OFFICERS AND DIRE	nent of St	ate ;	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIRI  ED  EMILE, VIARD M  441 NORTHEAST 195TH STREE NORTH MIAMI BEACH, FL 33179  T  Guillaume Hartine  525 NE 107#55+	Election Cerm Trust Fund Co  ECTORS  Delete  T, APT. 304  9	ppeign Financing ontribution.   11.  ITILE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make checky Florida Departs O OFFICERS AND DIRE	CTORS IN	10	
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIRI ED EMILE, VIARD M 441 NORTHEAST 195TH STREE NORTH MIAMI BEACH, FL 33174	P. Election Cam Trust Fund Co  ECTORS  Detets  T. APT. 304  Delets	paign Financing ontribution.   11.  ITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	\$5.00 May Be Added to Fees	Make check Florida Departs O OFFICERS AND DIRE	CTORS IN	inte	
TO.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS	Filling Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIRI  ED EMILE, VIARD M 441 NORTHEAST 195TH STREE NORTH MIAMI BEACH, FL 33179  T. Guillaume Hartine 525 NE 10755 Miami, FL 33161  S. Andre Guillaume 525 NE 10755	P. Election Cam Trust Fund Co  ECTORS  Detets  T. APT. 304  Delets	Inpaign Financing ontribution.   111.  ITILE  HAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  HAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  HAME  STREET ADDRESS  CITY-SI-ZIP	\$5.00 May Be Added to Fees	Make check Florida Departs O OFFICERS AND DIRE	CTORS IN Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filling Fee is \$61.25 Due by May 1, 2006  OFFICERS AND DIRI  ED EMILE, VIARD M 441 NORTHEAST 195TH STREE NORTH MIAMI BEACH, FL 33179  T. Guillaume Hartine 525 NE 10755 Miami, FL 33161  S. Andre Guillaume 525 NE 10755	9. Election Cerm Trust Fund Co  ECTORS  Delete  T, APT. 304 9  Delete  Delete	Inpelign Financing ontribution.   111.  ITTLE  HAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE  HAME  STREET ADDRESS	\$5.00 May Be Added to Fees	Make check   Florida Departs O OFFICERS AND DIRE	Change	Addition	

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report of supplemental-report to true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or thefreedver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attackment with an approximation of the corporation of the c

SIGNATURE:

ATURE AND TIPED OF PRINTED HAME OF BIOMING OFFICER OR DIRECTOR

1-125 OE

(305) 759-3051