

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90037 018 ****61.25

DOCUMENT # N06000003367

1. Entity Name
**MIAMI ARTS DESIGN & ENTERTAINMENT MERCHANTS
ASSOCIATION, INC.**



Principal Place of Business

**51 NE 40 ST
MIAMI, FL 33137**

Mailing Address

**51 NE 40 ST
MIAMI, FL 33137**

40104000



03192008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4283276

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATERNOSTRO, JOSEPH
901 NE 125ST #101
MIAMI, FL 33161**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
RUIZ, MARIA
180 NE 40TH ST
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
MARTIN, STEVE
66 NE 40TH ST
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
TAYLOR, WAYNE
51 NE 40TH ST
MIAMI, FL 33137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne Taylor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/08
Date

305-573-9988
Daytime Phone #

ATTACHMENT

40104083

#N06000003367

Joseph Paternostro Accounting Service
901 N.E. 125th Street, Ste. #101
North Miami, Florida 33161

May 16th, 2008

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Miami Arts Design & Entertainment Merch.
Federal I.D. #20-4283276

Dear Sir:

Please find attached the Annual Report for the above corporation. We are sorry for the delay, but the post office just delivered the card. Our check covering this report is attached for \$61.25.

Would you please abate any and all penalties in this matter.

Please accept our thanks for your cooperation.

Sincerely,



Joseph Paternostro
Accountant

cc: Miami Arts Design & Entertainment Merch.
Wayne Taylor