

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003473

FILED
Mar 20, 2009
Secretary of State

Entity Name: MIAMI CELEBRITY 5 K, INC.

Current Principal Place of Business:

501 BRICKELL KEY DRIVE
SUITE 504
MIAMI, FL 33131

New Principal Place of Business:

1500 NORTH MIAMI AVENUE
MIAMI, FL 33136

Current Mailing Address:

501 BRICKELL KEY DRIVE
SUITE 504
MIAMI, FL 33131

New Mailing Address:

2000 TOWERSIDE TERR SUITE 402
402
MIAMI, FL 33138

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWE, OSMOND C JR
501BRICKELL KEY DR.
SUITE 504
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HOWE, OSMOND C JR
2000 TOWERSIDE TERR
402
MIAMI, FL 33138 US

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: OSNOND C. HOWE, JR.

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: VINCENT, DANIEL
Address: 1550 N. MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

Title: VCHR () Delete
Name: ARMSTRONG, JAMES L
Address: 1550 N. MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

Title: TREA () Delete
Name: HUSTON, JR, TOM
Address: 1550 N. MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

Title: SEC () Delete
Name: LEWIS, LYNN B
Address: 1550 N. MIAMI AVENUE
City-St-Zip: MIAMI, FL 33136

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:

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: OSMOND C. HOWE, JR.

AIF

03/20/2009

Electronic Signature of Signing Officer or Director

Date