

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005175

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: MCA ACADEMY, INC.

## Current Principal Place of Business:

2860 OAK AVENUE  
MIAMI, FL 33133 US

## New Principal Place of Business:

## Current Mailing Address:

2860 OAK AVENUE  
MIAMI, FL 33133 US

## New Mailing Address:

FEI Number: 20-5389782

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KISHLAR, BRIGITTE  
2860 OAK AVENUE  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

ZUMPARO, PATRICIOS & WINKER  
312 MINORCA AVENUE  
CORAL GABLES, FL 33134 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: DAVID J. WINKER

04/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TPVS ( ) Delete  
Name: KISHLAR, BRIGITTE  
Address: 3505 WILDWOOD CIR  
City-St-Zip: MIAMI, FL 33133

Title: T ( ) Delete  
Name: KISHLAR, BRIGITTE  
Address: 3505 WILDWOOD CIR  
City-St-Zip: MIAMI, FL 33133

Title: T ( ) Delete  
Name: AYRAMDJAN, ALAIN  
Address: 3, RUE DES DAMES AUGUSTINES  
City-St-Zip: 92200 NEUILLY, FRANCE,

Title: T ( ) Delete  
Name: AYRAMDJAN, ALBERT  
Address: 1 BIS HAMEAU BOILEAU  
City-St-Zip: 75016 PARIS, FRANCE,

## 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: BRIGITTE KISHLAR

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date