

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012894

FILED  
Apr 30, 2012  
Secretary of State

Entity Name: ARTISTIC AWAKENINGS, INC.

**Current Principal Place of Business:**

3550 BISCAYNE BLVD.  
#304  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

3550 BISCAYNE BLVD.  
#304  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 51-0616777      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ZORN, STEVEN J  
1671 NE MIAMI GARDENS DRIVE  
APT. 249  
NORTH MIAMI BEACH, FL 33179 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: DC  
Name: SAENZ, STEVEN  
Address: 337 NE 168 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D  
Name: MOJICA, HENRY  
Address: 3550 BISCAYNE BLVD. SUITE 500  
City-St-Zip: MIAMI, FL 33137

Title: D  
Name: GILL, JACOB  
Address: 7927 SW 101 STREET #E205  
City-St-Zip: MIAMI, FL 33156

I hereby 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 all other like empowered.

SIGNATURE: STEVEN SAENZ

CD

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date