

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003392

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: FLY HIGH CULTURAL EXCHANGE, INC.

## Current Principal Place of Business:

15105 SW 128TH CT  
MIAMI, FL 331866372

## New Principal Place of Business:

## Current Mailing Address:

15105 SW 128TH CT  
MIAMI, FL 331866372

## New Mailing Address:

FEI Number: 37-1545559

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DURET, CARLINE  
15101 SW 128TH CT  
MIAMI, FL 331866372 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition  
Name: DURET, CARLINE PRESIDE  
Address: 15105 SW 128 CT  
City-St-Zip: MIAMI, FL 33186

Title: VICE ( ) Change (X) Addition  
Name: THOMAS, FRED VICE PR  
Address: 15105 SW 128 CT  
City-St-Zip: MIAMI, FL 33186

Title: TREA ( ) Change (X) Addition  
Name: DUPLESSY, KARINE TREASUR  
Address: 21358 SW 122TH AVE APT. # 103  
City-St-Zip: MIAMI, FL 33189

Title: P. R ( ) Change (X) Addition  
Name: MARTINEAU, BENJAMIN P. RELA  
Address: 13912 SW 144 TERR  
City-St-Zip: MIAMI, FL 33186

Title: TRUS ( ) Change (X) Addition  
Name: JEAN, MAUD TRUST  
Address: 9226 SW 148 CT  
City-St-Zip: MIAMI, FL 33196

Title: TRUS ( ) Change (X) Addition  
Name: BEAUBOEUF, GAELLE TRUST  
Address: 15105 SW 128 CT  
City-St-Zip: MIAMI, FL 33186

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: CARLINE DURET

PRES

04/14/2008

Electronic Signature of Signing Officer or Director

Date