2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2009
Secretary of State

DOCUMENT# N07000003392

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 (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

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

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

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

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

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:

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: FRED THOMAS VICE 09/09/2009
Electronic Signature of Signing Officer or Director — Date