

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004021

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** ARTISTIC BOOSTER FOUNDATION INC.

**Current Principal Place of Business:**

1900 NW 84 AVE  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

1900 NW 84 AVE  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 20-8889573

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARCIA, LOIDA  
1900 NW 84TH AVENUE  
MIAMI, FL 33126 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: P ( ) Delete  
Name: GARCIA, LOIDA  
Address: 1900 NW 84TH AVENUE  
City-St-Zip: MIAMI, FL 33126

Title: VP ( ) Delete  
Name: ARMAS, ANGEL  
Address: 10015 SW 139 PLACE  
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete  
Name: SMALLEY, VICTOR  
Address: 9064 SW 87 AVE  
City-St-Zip: MIAMI, FL 33176

**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:

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: LOIDA GARCIA

P

04/14/2009

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

\_\_\_\_\_  
Date