

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007688

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** EXPRESSIONS OF JOY PERFORMING ARTS INSTITUTE, INC.

**Current Principal Place of Business:**

2866 SW 12 STREET  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

849 SE 8TH AVE.  
SECOND FLOOR  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

2866 SW 12 STREET  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

**FEI Number:** 26-0706053      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WALKER, TOM  
2866 SW 12 STREET  
DEERFIELD BEACH, FL 33442      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:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES ( ) Change (X) Addition  
Name: WALKER, TOM  
Address: 2866 SW 12 ST.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SEC ( ) Change (X) Addition  
Name: GEYER, JOSIANE  
Address: 404 LIBERTY CT.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: DIR ( ) Change (X) Addition  
Name: NAVARRO, VICTOR  
Address: 901 S CONGRESS AVE.  
City-St-Zip: WEST PALM BEACH, FL 33406

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: JOSIANE GEYER

SEC

04/28/2008

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

\_\_\_\_\_  
Date