2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010585

Entity Name: PEPE BRONCE BALLET INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1767 W 37 ST 16-18 HIALEAH, FL 33012

Current Mailing Address: New Mailing Address:

1767 W 37 ST 16-18 HIALEAH, FL 33012

FEI Number: 26-1400003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HALEAH, FL 33012 US SUIT16-18
HIALEAH, FL 33012 US

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: JOSE O LOPEZ 03/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S, () Delete Title: P,S, (X) Change () Addition Name: LOPEZ, JOSE O Name: LOPEZ, JOSE O

 Address:
 4215 W. 16 AVE
 Address:
 1767 W 37 STR

 City-St-Zip:
 HIALEAH, FL 33012
 City-St-Zip:
 HIALEAH, FL 33012

Title: D () Delete Title: D (X) Change () Addition Name: BUSTILLO, MANUEL D (X) Change () Addition Name: BUSTILLO, MANUEL

Address: 4215 W. 16 AVE Address: 1767 W37 STR
City-St-Zip: HIALEAH, FL 33012 City-St-Zip: HIALEAH, FL 33012

Title: D () Delete Title: D (X) Change () Addition Name: RODRIGUEZ, JANNETTE D (X) Change () Addition Name: RODRIGUEZ, JANNETTE

 Address:
 4215 W. 16 AVE
 Address:
 1767 W37 STR

 City-St-Zip:
 HIALEAH, FL 33012
 City-St-Zip:
 HIALEAH, FL 33012

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 LOPEZ, JOSE O
 Name:
 LOPEZ, JOSE O

 Address:
 4215 W. 16 AVE
 Address:
 1767 W37 STR

 City-St-Zip:
 HIALEAH, FL 33012
 City-St-Zip:
 HIALEAH, FL 33012

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: JOSE O LOPEZ D 03/20/2009