

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004226

FILED
Aug 06, 2009
Secretary of State

Entity Name: LIVING ARTS TRUST, INC.

Current Principal Place of Business:

2401 SWANSON AVE.
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2401 SWANSON AVE.
MIAMI, FL 33133

New Mailing Address:

FEI Number: 44-2277899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

MARTHELL, VIVIAN
2401 SWANSON AVE.
MIAMI, FL 33133 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: CD () Delete
Name: MARTELL, VIVIAN
Address: 2401 SWANSON AVE.
City-St-Zip: MIAMI, FL 33133

Title: CD () Delete
Name: TABSCH, KAREEM
Address: 4432 NW 185TH ST.
City-St-Zip: MIAMI, FL 33055

Title: TD () Delete
Name: CAPIRO, RYAN
Address: 971 SW 154TH PATH
City-St-Zip: MIAMI, FL 33194

Title: S () Delete
Name: MALONEY, HEATHER
Address: 315 FRANKLIN ST., APT. 1
City-St-Zip: HOLLYWOOD, FL 33019

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

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: M () Change (X) Addition
Name: GALARDE, LYNAIDA C
Address: 8006 SW 107 AVENUE, #305
City-St-Zip: MIAMI, FL 33175

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: VIVIAN MARTELL

CD

08/06/2009

Electronic Signature of Signing Officer or Director

Date