

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005716

FILED  
Feb 27, 2009  
Secretary of State

Entity Name: YOUTH FOR THE ARTS FORUM, INC.

**Current Principal Place of Business:**

1001 COLONY POINT CIR., APT. 316  
PEMBROKE PINES, FL 33026

**New Principal Place of Business:**

255 ALHAMBRA CIR  
455  
CORAL GABLES, FL 33134

**Current Mailing Address:**

1001 COLONY POINT CIR., APT. 316  
PEMBROKE PINES, FL 33026

**New Mailing Address:**

FEI Number: 26-2826513      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BARRANCO, CLARA  
1001 COLONY POINT CIR., APT. 316  
PEMBROKE PINES, FL 33026      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: PD ( ) Delete  
Name: BARRACO, CLARA  
Address: 1001 COLONY POINT CIR., APT. 316  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: VD ( ) Delete  
Name: FERNANDEZ, CARLOS A  
Address: 8801 B FOUNTAIN BLUE BLVD., #202  
City-St-Zip: MIAMI, FL 33172

Title: S ( ) Delete  
Name: VEGA, SONJA  
Address: 8540 NW 14TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: T ( ) Delete  
Name: RUBIO, CLEMENTINA  
Address: 689 NW 123 PL.  
City-St-Zip: MIAMI, FL 33182

Title: VTD ( ) Delete  
Name: LOPEZ, ANZEINA  
Address: 12760 SW 50 TER.  
City-St-Zip: MIAMI, FL 33175

**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:

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: CLARA BARRANCO

PD

02/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date