2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006283

Entity Name: MUSIC BOOSTER ASSOCIATION, INC.

FILED May 26, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9140 FOUNTAINEBLEAU BLVD

MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

9140 FOUNTAINEBLEAU BLVD 501 MIAMI, FL 33172

FEI Number: 26-2994173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

BURNETT, MYRA MARTINEZ, EOSE

2847 SW 132 CT 9140 FOUNTAINEBLEAU BLVD

MIAMI, FL 33175 US APT #501

MIAMI, FL 33172 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: ROSE MARTINEZ 05/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BURNETT, MYRA Name: MARTINEZ, ROSE

Address: 2847 SW 132 CT Address: 9140 FOUNTAINEBLEAU BLVD APT #501

City-St-Zip: MIAMI, FL 33175 City-St-Zip: MIAMI, FL 33172

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MARTINEZ, ROSE M
 Name:
 MORENO, JUDITH

 Address:
 9140 FOUNTINEBLEAU BLVD #501
 Address:
 14258 SW 24 STREET

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:
 MIAMI, FL 33175

Title: () Delete Title: TR () Change (X) Addition

Name: Name: TOMAS-LEDESMA, ROXANA C
Address: Address: 3551 SW 140 AVE

City-St-Zip: City-St-Zip: MIAMI, FL 33175

Title: () Delete Title: SC () Change (X) Addition
Name: MARTINEZ, ROSE

Address: Address: 9140 FOUNTAINEBLEAU CLVD

City-St-Zip: City-St-Zip: MIAMI, FL 33172

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: ROSE MARTRINEZ P 05/26/2009