

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007883

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** VICTOR'S COMMUNITY MUSIC SCHOOL, INC.

**Current Principal Place of Business:**

315 NE 55TH STREET  
MIAMI, FL 33137

**New Principal Place of Business:**

**Current Mailing Address:**

315 NE 55TH STREET  
MIAMI, FL 33137

**New Mailing Address:**

P O BOX 370313  
MIAMI, FL 33137

**FEI Number:** 27-0851875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

AVRIL, VICTOR  
315 NE 55TH STREET  
MIAMI, FL 33137 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  
Name: AVRIL, VICTOR  
Address: 315 NE 55TH STREET  
City-St-Zip: MIAMI, FL 33137

Title: VPD  
Name: DERISME, ESTHER  
Address: 22075 LAS BRISAS CIR APT 309  
City-St-Zip: BOCA RATON, FL 33433

Title: SD  
Name: PIERRE LOUIS, THAISHA  
Address: 22075 LAS BRISAS CTR APT 309  
City-St-Zip: BOCA RATON, FL 33433

I hereby 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 all other like empowered.

**SIGNATURE:** VICTOR AVRIL

FPD

02/17/2010

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

\_\_\_\_\_  
Date