2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2007
Secretary of State

DOCUMENT# N10200

Entity Name: MARY STREET DANCE THEATRE, INC.

Current Principal Place of Business:

% KYLE R SAXON
6820 SW 65 AVE
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

% KYLE R SAXON
6820 SW 65 AVE
MIAMI, FL 33143

New Mailing Address:

FEI Number: 59-2637074 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAXON, KYLE R
2600 DOUGLAS ROAD - SUITE 1109
CORAL GABLES, FL 33134 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: ANDREE, DALE,
Address: 6820 SW 65 AVE
City-St-Zip: MIAMI, FL

Title: T ( ) Delete
Name: SAXON, KYLE R
Address: 6820 SW 65 AVE
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete
Name: ALONSO, DIEGO
Address: 2159 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: D ( ) Delete
Name: ALONSO, ASELA
Address: 1803 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: SAXON, KYLE R
Address: 6820 SW 65 AVE
City-St-Zip: MIAMI, FL 33143

Title: D (X) Change ( ) Addition
Name: ALONSO, DIEGO
Address: 10250 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D (X) Change ( ) Addition
Name: ALONSO, ASELA
Address: 10250 S.W. 62ND AVENUE
City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the 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: KYLE R. SAXON S 03/01/2007

Electronic Signature of Signing Officer or Director — Date