2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20854

Entity Name: BLACK HERITAGE MUSEUM INC.

Apr 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15801 SW 102 AVE. 15801 SW 102 AVE. MIAMI, FL 332577327 MIAMI, FL 332577327 US

Current Mailing Address: New Mailing Address:

15801 SW 102 AVE. 15801 SW 102 AVE PO BOX 570327 MIAMI, FL 332577327 US MIAMI, FL 332577327

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

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

BAILEY, ABE A 20401 N.W. 2ND AVE. SUITE 101 MIAMI, FL 33169 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:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

OFFICERS AND DIRECTORS:

() Delete KRUIZE, PRISCILLA G. S. Name:

Address: 15801 S.W. 102ND AVE. City-St-Zip: MIAMI, FL

Title: VTT () Delete Name: ROBERTS, GARY Address: 15922 NW 38 PLACE

City-St-Zip: MIAMI, FL

City-St-Zip:

Title: () Delete COFIELD, EVA J Name: 14110 VAN BUREN Address:

MIAMI, FL 33176

Title: (X) Change () Addition Name: ROBERTS, GARY

Address: 15922 NW 38 PLACE City-St-Zip: MIAMI, FL 33054 US

Title: (X) Change () Addition

KRUIZE, PRISCILLA G. S.

15801 S.W. 102ND AVE.

MIAMI, FL 33157327 US

Name: COFIELD, EVA J Address: 14110 VAN BUREN City-St-Zip: MIAMI, FL 33176 US

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: PRISCILLA G. STEPHENS KRUIZE PT 04/22/2009