2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007
Secretary of State

DOCUMENT# N25346

Entity Name: PROMUSICA E ARTE, INC.

Current Principal Place of Business:

6331 SW 65 AVE
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

6331 SW 65 AVE
MIAMI, FL 33143 US

New Mailing Address:

FEI Number: 65-0096894 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MASCARENHAS, MARITZA HELMEN FREDA
6331 SW 65 AVE
MIAMI, FL 331432035 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: MASCARENHAS, MARITZA, H.
Address: 18556 SW 93RD PL
City-St-Zip: MIAMI, FL 33157

Title: VD ( ) Delete
Name: ANDRADE, MARIZA
Address: 2016 CENTURY HILLS DR NE
City-St-Zip: ROCHESTER, MN 55906

Title: D ( ) Delete
Name: RICE, JOHN
Address: 2016 CENTURY HILLS DR NE
City-St-Zip: ROCHESTER, MN 55906

Title: DST ( ) Delete
Name: DOTY, NELLIE
Address: 9222 BANKSIDE DRIVE
City-St-Zip: HOUSTON, TX 77031

Title: D ( ) Delete
Name: HOENIG, DAVID
Address: 7018 ROOK
City-St-Zip: HOUSTON, TX 77087

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 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: MARITZA H. MASCARENHAS PD 04/09/2007

Electronic Signature of Signing Officer or Director — Date