2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28642

Title:

Name:

Address:

City-St-Zip:

VD

BROWN, ELLERY

MIAMI, FL 33157

7749 SW 184 WAY

() Delete

FILED Mar 22, 2009 Secretary of State

Entity Name: MIAMI DANCE FUTURES, INC.

Current Principal Place of Business: New Principal Place of Business: C/O NEW WORLD SCHOOL OF THE ARTS 8901 SOUTHWEST 79TH COURT 300 N.E. 2ND AVE. MIAMI, FL 33156 MIAMI, FL 33132 **Current Mailing Address: New Mailing Address:** C/O NEW WORLD SCHOOL OF THE ARTS 8901 SOUTHWEST 79TH COURT 300 N.E. 2ND AVE. MIAMI, FL 33156 MIAMI, FL 33132 FEI Number: 65-0076325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAW OFFICES OF HENRY T. COURTNEY 2199 PONCE DE LEON BLVD., STE. 301 CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WALESH, SIDNEY Name: Name: 1451 S OLIVE AVE Address: Address: City-St-Zip: W PALM BCH, FL 33401 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ANDREA, SEIDEL Name: Address: 5900 S. W. 84TH AVE. Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: () Delete Title: () Change () Addition LEWIS, DANIEL Name: Name: 8901 SW 74TH COURT Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip:

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DANIEL LEWIS **PRES** 03/22/2009

() Change () Addition