2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# N28896

Entity Name: NATIONAL ART EXHIBITIONS OF THE MENTALLY ILL, INC.

Current Principal Place of Business:

719 S 15 AVE
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 350891
MIAMI, FL 33135 US

New Mailing Address:

FEI Number: 65-0098926 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, JUAN
719 S 15 AVE
HOLLYWOOD, FL 33020 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:	ED	( ) Delete
Name:	MARTIN, JUAN	
Address:	P O BOX 350891	
City-St-Zip:	MIAMI, FL 33135	
Title:	P	( ) Delete
Name:	HITE, DENISE	
Address:	19201 NW 60TH AVENUE	
City-St-Zip:	MIAMI LAKES, FL 33019	
Title:	T	( ) Delete
Name:	OTEIZA, RICHARD	
Address:	400 SW 107 AVE	
City-St-Zip:	MIAMI, FL 33174	
Title:	D	( ) Delete
Name:	QUINTANA, SILVIA,	
Address:	719 SOUTH 15 AVE.	
City-St-Zip:	HOLLYWOOD, FL	

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:	

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: JUAN MARTIN ED 01/21/2009

Electronic Signature of Signing Officer or Director — Date