

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28896

FILED
Feb 06, 2011
Secretary of State

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
Name: MARTIN, JUAN
Address: P O BOX 350891
City-St-Zip: MIAMI, FL 33135

Title: P
Name: HITE, DENISE
Address: 19201 NW 60TH AVENUE
City-St-Zip: MIAMI LAKES, FL 33019

Title: T
Name: OTEIZA, RICHARD
Address: 400 SW 107 AVE
City-St-Zip: MIAMI, FL 33174

Title: D
Name: QUINTANA, SILVIA
Address: 719 SOUTH 15 AVE.
City-St-Zip: HOLLYWOOD, FL 33020

I hereby 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 all other like empowered.

SIGNATURE: JUAN MARTIN

EXEC

02/06/2011

Electronic Signature of Signing Officer or Director

Date