2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32274

FILED Mar 09, 2006 Secretary of State

US

Entity Name: BROWARD CENTER OF DANCE AND THEATRE ARTS, INC.

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

5021 SOUTH ST. ROAD 7 3809 NORTH 41 AVE

SUITE 211 HOLLYWOOD, FL 33021

DAVIE, FL 33314

New Mailing Address: Current Mailing Address:

3820 S.W. 53 COURT 3809 NORTH 41 AVE

FT LAUDERDALE, FL 33312 US HOLLYWOOD, FL 33021 US

FEI Number: 65-0127001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TABACCO, JACKIE TABACCO, JACQUELINE 3820 SW 53 COURT 4491 SW 105 AVENUE

FORT LAUDERDALE, FL 33312 US DAVIE, FL 33328

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: JACQUELINE TABACCO 03/09/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete DP (X) Change () Addition

TABACCO, JACKIE TABACCO, JACQUELINE Name: Name: 3820 SW 53 CT Address: 4491 SW 105 AVENUE Address:

City-St-Zip: FT. LAUDERDALE, FL 33312 US City-St-Zip: DAVIE, FL 33328 US

Title: () Delete Title: () Change () Addition

BRAVERMAN, REBECCA Name: Name: Address: 3809 N 41 AVE Address: HOLLYWOOD, FL 33021 US City-St-Zip: City-St-Zip:

Title: 2VPD () Delete Title: () Change () Addition

WEBER, GARI Name: Name: 10460 KESSLER ST Address: Address: City-St-Zip: PLANTATION, FL 33324 US City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: CURRAN, JOAN, Name: Address: 3133 SW 58 PL. Address: FT. LAUDERDALE, FL 33312 US City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition

BEASLEY, DEBI Name: Name: 2055 NE 204TH ST Address: Address: City-St-Zip: NORTH MIAMI, FL 33179 US 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: JACQUELINE TABACCO DP 03/09/2006