2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46850

FILED Juņ 18, 2<u>00</u>7 Secretary of State

Entity Name: AFRICAN CARIBBEAN AMERICAN PERFORMING ARTISTS, INC. (ACAPAI)

Current Principal Place of Business: New Principal Place of Business: 585 NW 94 STREET MIAMI, FL 33150 **Current Mailing Address: New Mailing Address:** P O BOX 014846

MIAMI, FL 33101 US

FEI Number: 65-0312577 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROBERTS, PATRICIA 585 NW 94TH ST MIAMI, FL 33150 US

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 (X) Change () Addition FAULKS, ZANDRA FAULKS, ZANDRA Name: Name: 2281 SHERMAN CIR S, APT B-511 Address: 1280 SW 101 TERRACE Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: PEMBROKE PINES, FL 33025 Title: DSI Title: SEC (X) Change () Addition () Delete ROBERTS, PATRICIA Name: Name: ROBERTS, AKILA Address: 585 NW 94 ST Address: 585 NW 94 ST City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33150 Title: () Delete Title: **TREA** (X) Change () Addition ROBERTS, GLEN ROBERTS, AQUIL Name: Name:

16405 NW 25 AVENUE Address: Address: 585 NW 94 ST City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI, FL 33055

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

MORRIS, ELLA Name: Name: 3950 NW 194 ST Address: Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip:

Title: VΡ () Delete Title: VΡ (X) Change () Addition

SAINTIDOR, EMANIE ROBERTS, AQUIL Name: Name: 670 NE 86 STREET, APT. 118 585 NW 94 STREET Address: Address: City-St-Zip: MIAMI, FL 33138 City-St-Zip: MIAMI, FL 33150

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

ROBERTS, AQUIL NORGUES, HERVE Name: Name: Address: **585 NW 94 STREET** Address: 1350 NE 128 ST, APT. 8 MIAMI, FL 33150 NORTH MIAMI, FL 33161 City-St-Zip: 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: PATRICIA ROBERTS EX.D 06/18/2007