2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000004512

Entity Name: LATIN AMERICAN CENTER FOR THE ARTS, INC.

FILED Feb 13, 2002 8:00 AM Secretary of State

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

332 NW 34 AV 782 NW 42 AVENUE MIAMI, FL 33125

SUITE 210 MIAMI, FL 33126

Current Mailing Address: New Mailing Address:

782 NW 42 AVE, STE. 550 782 NW 42 AVE. SUITE 210 MIAMI, FL 33126

MIAMI, FL 33126

FEI Number: 65-0858308 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:

LOPEZ, JORGE LOPEZ, JORGE 332 NW 34 AV 782 NW 42 AVE MIAMI, FL 33125 SUITE 210 US

MIAMI, FL 33126 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: JORGE LOPEZ 02/13/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

LOPEZ, JORGE A LOPEZ, JORGE A Name: Name: Address: 332 NW 34 AV Address: 782 NW 42 AVE SUITE 210

City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33126

Title: Title: (X) Change () Addition () Delete Name: SIERRA, DAISY Name: SIERRA, DAISY

Address: 332 NW 34 AV Address: 782 NW 42 AVE SUITE 210 City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33126

Title: () Delete Title: (X) Change () Addition BENTANCOURT, OLGA BENTANCOURT, OLGA Name: Name:

332 NW 34 AV 782 NW 42 AVE SUITE 210 Address: Address: City-St-Zip: MIAMI, FL 33125 City-St-Zip: MIAMI, FL 33126

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JORGE LOPEZ D 02/13/2002