2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002543

City-St-Zip: MIAMI BEACH, FL 33140

City-St-Zip: MIAMI BEACH, FL 33138

LIEBMAN, NANCY

16 ISLAND AVE #7C

() Delete

Title:

Name:

Address:

Entity Name: MIAMLBEACH ARTS TRUST INC

FILED Jun 30, 2005 Secretary of State

Entity Nar	ME: MIAMI BEACH ARTS TRUST, INC.		
Current P	rincipal Place of Business:	New Principal Place of Business:	
1775 WAS	. BURSTEIN HINGTON AVENUE, PENTHOUSE TWO ACH, FL 331397544		
Current M	ailing Address:	New Mailing Address:	
1775 WAS	. BURSTEIN HINGTON AVENUE, PENTHOUSE TWO ACH, FL 331397544		
	65-0944084 FEI Number Applied For () ce with s. 607.193(2)(b), F.S., the corporation did no Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired () t receive the prior notice. Name and Address of New Registered Agent:	
1775 WAS PENTHOU MIAMI BEA	ACH, FL 331397544 US named entity submits this statement for the p	ourpose of changing its registered office or registered agent, or bot	th,
SIGNATUR			
3.3.1.1.0.	Electronic Signature of Registered Age	ent Date	_
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS:
Title: Name: Address: City-St-Zip:	D () Delete BURSTEIN, HARVEY J 1775 WASHINGTON AVE MIAMI BEACH, FL 33139	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address:	S () Delete BROOKS, JULIE 353 W 47TH ST PH-H	Title: S (X) Change () Addition Name: WOEHRLE, PAUL S Address: 111 LAKE EMERAL D. DRIVE #410	

City-St-Zip: OAKLAND PARK, FL 33309

() Change () Addition

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL S. WOEHRLE MR. 06/30/2005