

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134794

FILED
Feb 20, 2009
Secretary of State

Entity Name: ART INSTITUTE OF WESTON, INC.

Current Principal Place of Business:

2900 GLADES CIRCLE
1600
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

2900 GLADES CIRCLE
1600
WESTON, FL 33327

New Mailing Address:

FEI Number: 68-0543601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LECHASNEY, CHARLES A
1140 GLENWOOD CT.
WESTON, FL 33326 US

Name and Address of New Registered Agent:

CANO, PABLO A
1456 CAMELLIA CIR
WESTON, FL 33326 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: PABLO A.CANO

02/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LECHASNEY, CHARLES
Address: 1140 GLENWOOD CT.
City-St-Zip: WESTON, FL 33326

Title: VPD (X) Delete
Name: CANO, PABLO A
Address: 1140 GLENWOOD CT.
City-St-Zip: WESTON, FL 33326

Title: TD () Delete
Name: FIRGAU, MARIA C
Address: 1140 GLENWOOD CT.
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CANO, PABLO A
Address: 1456 CAMELLIA CIR
City-St-Zip: WESTON, FL 33326

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PABLO A. CANO

PRES

02/20/2009

Electronic Signature of Signing Officer or Director

Date