

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024277

Entity Name: ART-SOUND MIAMI, INC.

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

2025 NW 102ND AVENUE  
SUITE 106  
DORAL, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

2025 NW 102 AVE  
SUITE 106  
MIAMI, FL 33172

## New Mailing Address:

FEI Number: 56-2333132      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACIAS, ARTURO  
18102 SW 83RD AVENUE  
MIAMI, FL 33157      US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MACIAS, ARTURO  
Address: 18102 SW 83RD AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: TRE ( ) Delete  
Name: BARAJAS, MARTINA  
Address: 6102 NW 114TH CT. #104  
City-St-Zip: MIAMI, FL 33178

Title: S ( ) Delete  
Name: SANTACROCE, MARIA E  
Address: 4779 COLLINS AVENUE APT 2102  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change ( ) Addition  
Name: SANTACROCE, MARIA E  
Address: 4779 COLLINS AVENUE APT 2102  
City-St-Zip: MIAMI BEACH, FL 33140

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: MARTINA BARAJAS

TRE

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date