

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000062235

FILED
Mar 13, 2006
Secretary of State

Entity Name: WESTON JAZZ CENTER INC

Current Principal Place of Business:

1643 EAGLE BEND
WESTON, FL 33327

New Principal Place of Business:

16634 SADDLE CLUB ROAD
WESTON, FL 33326

Current Mailing Address:

1643 EAGLE BEND
WESTON, FL 33327

New Mailing Address:

FEI Number: 20-2756029

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, BETH
1643 EAGLE BEND
WESTON, FL 33327 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: D () Delete
Name: COHEN, BETH
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: FYODOROV, MARISA
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

Title: D () Delete
Name: ROMERO, SALVATRICE A
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ROMERO, SALVATRICE A
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

Title: D (X) Change () Addition
Name: SHAW, COLLETTE
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

Title: D () Change (X) Addition
Name: HAVERY, ANNE
Address: 1643 EAGLE BEND
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the 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: BETH COHEN

D

03/13/2006

Electronic Signature of Signing Officer or Director

_____ Date