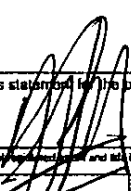
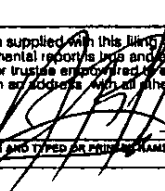


FILED
Sep 11, 2007 8:00 am
Secretary of State

09-11-2007 90005 041 ***550.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000117612			
1. Entity Name CENTRO DE INICIACION ARTISTICA, INC.			
Principal Place of Business 1508 BAY ROAD, APT. #21 MIAMI BEACH, FL 33139		Mailing Address 1508 BAY ROAD, APT. #21 MIAMI BEACH, FL 33139	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite Apt #, etc.		Suite Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
08202007		Chg-P CR2E034 (12/06)	
4. FEI Number 20-3364442		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERCADANTE, RAFAEL 1508 BAY ROAD, APT. #21 MIAMI BEACH, FL 33139		7. Name and Address of New Registered Agent Name Alejandra Rodriguez Street Address (P.O. Box Number is Not Acceptable) 9851 NW 58th Street, Suite 121 City Miami FL Zip Code 33178	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Alejandra Rodriguez September 7, 2007 (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$500.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MERCADANTE, RAFAEL 2 1508 BAY ROAD, APT #21 MIAMI BEACH, FL 33139 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CAMACHO, SILVIA 1508 BAY ROAD APT # 21 MIAMI BEACH, FL 33139 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T RODRIGUEZ, ALEJANDRA 10981 N W 72 TR DORAL, FL 33178 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P/S/T Alejandra Rodriguez ☒ Change ☐ Addition 9851 NW 58th Street, Suite 121 Doral, Florida 33178
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered			
SIGNATURE: 		Alejandra Rodriguez September 7, 2007 786-877-4677	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	