2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S25389

FILED Aug 07, 2006 Secretary of State

Entity Name: PERFORMING ARTS MANAGEMENT OF NORTH MIAMI, INC.

Current Principal Place of Business:				New Principal Place of Business:		
220 WEST 42ND STREET NEW YORK, NY 10036				9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210 US		
Current Mailing Address:			New Ma	New Mailing Address:		
220 WEST 42ND STREET NEW YORK, NY 10036				9348 CIVIC CENTER DRIVE BEVERLY HILLS, CA 90210 US		
FEI Number:	: 65-0245800	FEI Number Applied For ()	FEI Number Not Ap	oplicable () Cer	rtificate of Status Desired()	
Name and	Address of C	Current Registered Agent:	Name ar	nd Address of New	Registered Agent:	
1201 HAYS TALLAHAS The above			ourpose of changing	g its registered office	e or registered agent, or both	
in the State SIGNATUF	e of Florida. ⊃⊏·					
SIGNATOR		ic Signature of Registered Age	ent		Date	
Election Car		g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITIO	NS/CHANGES TO	OFFICERS AND DIRECTO	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	MAYS, L L C 200 EAST BAS SAN ANTONIO,	TX 78209 Delete COO SE RD	Title: Name: Address: City-St-Zip Title: Name: Address: City-St-Zip	RAPINO, MICHAEL 9348 CIVIC CENTER BEVERLY HILLS, CA D/O (X) Cha RIDGEWAY, ALAN 9348 CIVIC CENTER	R DRIVE A 90210 US ange () Addition CFO R DRIVE	
Title: Name: Address: City-St-Zip: Title: Name: Address:	HEAD, DALE A 2000 W. LOOP HOUSTON, TX	77027) Delete _L T	Title: Name: Address: City-St-Zip Title: Name: Address:	WILLARD, KATHY 9348 CIVIC CENTER BEVERLY HILLS, CA		
City-St-Zip: Title: Name: Address: City-St-Zip:	SAN ANTONIO,	TX 78209) Delete HY OOP SOUTH	City-St-Zip Title: Name: Address: City-St-Zip	()Cha	ange () Addition	
Name: Address:	CEO (X) BECKER, BRIA 2000 WEST LC HOUSTON, TX	OOP SOUTH	Title: Name: Address: City-St-Zip	, ,	ange () Addition	
Title: Name: Address: City-St-Zip:	BECKER, BRIA 2000 WEST LC	N POP SOUTH	Name: Address:	, ,	inge () Addition	

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: ALAN RIDGEWAY CFO 08/07/2006