

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007045

Entity Name: JAZZ MUSEUM OF FLORIDA, INC.**Current Principal Place of Business:**369 EAST 10 STREET
HIALEAH, FL 33010**Current Mailing Address:**369 EAST 10 STREET
MIAMI, FL 33010 US**FEI Number:** 27-4172847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAMIREZ, ROBERTO
2314 WEST 80TH STREET
UNIT 3
HIALEAH, FL 33016 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT, FOUNDER
Name	RAMIREZ, ROBERTO
Address	2314 WEST 80TH STREET UNIT 3
City-State-Zip:	MIAMI FL 33016

Title	VP
Name	CAMILO, MICHEL
Address	400 NORTH ROYAL POINCIANA BLVD APT C7
City-State-Zip:	MIAMI SPRINGS FL 33166

Title	SECRETARY
Name	REOYO, GLENDA
Address	349 EAST 2ND STREET UNIT 1
City-State-Zip:	HIALEAH FL 33010

Title	TREASURER
Name	CAMILO, GLENN
Address	349 EAST 2 STREET UNIT 1
City-State-Zip:	HIALEAH FL 33010

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERTO RAMIREZ

PRESIDENT, FOUNDER

02/04/2015

Electronic Signature of Signing Officer/Director Detail_____
Date