2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007
Secretary of State

DOCUMENT# 710891

Entity Name: GREATER MIAMI OPERA, INC.

Current Principal Place of Business:

1200 CORAL WAY
ARTURO DI FILIPPI EDUCATIONAL CENTER
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1200 CORAL WAY
ARTURO DI FILIPPI EDUCATIONAL CENTER
MIAMI, FL 33145

New Mailing Address:

FEI Number: 59-6001597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEUER, ROBERT M
1200 CORAL WAY
MIAMI, FL 33145 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

OFFICERS AND DIRECTORS:

Title:	M	( ) Delete
Name:	ROBERT HEUER,	
Address:	1200 CORAL WAY	
City-St-Zip:	MIAMI, FL 33145	
Title:	SD	( ) Delete
Name:	GORDON, EVA U	
Address:	220 ALHAMBRA CIRCLE, 5TH FLOOR	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:	PD	( ) Delete
Name:	ROBINSON, JANE A.	
Address:	1844 W. 23RD STREET, NORTH 3	
City-St-Zip:	MIAMI BEACH, FL 33140	
Title:	TD	( ) Delete
Name:	MENDELSON, VICTOR N.	
Address:	825 BRICKELL BAY DRIVE, SUITE 1644	
City-St-Zip:	MIAMI, FL 33131	
Title:	VPD	( ) Delete
Name:	MENDELSON, ARLENE	
Address:	1200 CORAL WAY	
City-St-Zip:	MIAMI, FL 33145	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	M	(X) Change ( ) Addition
Name:	HEUER, ROBERT M CEO	
Address:	1200 CORAL WAY	
City-St-Zip:	MIAMI, FL 33145	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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

SIGNATURE: ROBERT M HEUER MR 03/02/2007

Electronic Signature of Signing Officer or Director — Date