


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

01-29-2008 90026 005 ****70.00
 04-24-2008 90102 032 ****70.00

DOCUMENT # N00000003446

1. Entity Name
 MIAMI CIVIC MUSIC ASSOCIATION, INC.



Principal Place of Business 5360 SW 87TH AVENUE MIAMI, FL 33165	Mailing Address 5360 SW 87 AVENUE MIAMI, FL 33165
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DO NOT WRITE IN THIS SPACE



04072008 No Chg-NP CR2E037 (4/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SACKSTEIN, ROSALINA G DR.
 5360 SW 87 AVE
 MIAMI, FL 33165

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SACKSTEIN, ROSALINA DRA 5360 SW 87 AVENUE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SACKSTEIN, HAROLD 5360 SW 87 AVENUE MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT AGUIRRE, AILDA 8451 SW 85 STREET MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <i>EXECUTIVE VICE-President</i> CONDIE, ELSA Dr Jay Hess 7879 SW 40 STREET 17421 SW 56 ST MIAMI, FL 33155 Miami, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, PHILIP 6225 NW 85 STREET MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOPICO, ELVIRA 1400 SW 90 AVENUE MIAMI, FL 33174

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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 report 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: *Rosalina G Sackstein, Dr. Rosalina G Sackstein* **9/11/08** **(305)271-8449**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #