

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# N00000003446

Entity Name: MIAMI CIVIC MUSIC ASSOCIATION, INC.

Current Principal Place of Business:

5360 SW 87TH AVENUE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

5360 SW 87 AVENUE
MIAMI, FL 33165

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SACKSTEIN, ROSALINA G DR.
5360 SW 87 AVE
MIAMI, FL 33165 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: DP () Delete
Name: SACKSTEIN, ROSALINA DRA
Address: 5360 SW 87 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: DV () Delete
Name: SACKSTEIN, HAROLD
Address: 5360 SW 87 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: DT () Delete
Name: AGUIRRE, AIDA
Address: 8451 SW 85 STREET
City-St-Zip: MIAMI, FL 33143

Title: E VP () Delete
Name: HEGG, DR. JAY
Address: 7421 SW 56TH STREET
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: DAVIS, PHILIP
Address: 6225 NW 85 STREET
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: DOPICO, ELVIRA
Address: 1400 SW 90 AVENUE
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: E VP (X) Change () Addition
Name: HESS, DR. JAY DR
Address: 7421 SW 56TH STREET
City-St-Zip: MIAMI, FL 33155

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 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: ROSALINA G. SAKSTEIN

DP

02/09/2009

Electronic Signature of Signing Officer or Director

Date