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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N19103

(3)

SYMPHONY OF THE AMERICAS, INC.

Suite, Apt. #, etc. 27	STIVIET	IONT OF THE AMERICAS	, INC.					
FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 333	Principal Place	e of Business	Mailing Address	Mailing Address		* 1888/1904 404 11910 1960/ 11810 0011	OO IIII UTOK DIBK DIDII BIDI	I AIBII BHBII IODI
2. Principal Place of Business 2a. Mailing Address 3a. 4. FBI Number 65-0157441	3300 N FEDERAL HWY #214 3300 N FEDERAL HWY #2							
25 Suite, Apt. #, etc. 25 Suite, Apt. #, etc. 27 Suite, Apt. #,								
City & State	21		26	26			 '' 	
20	22		27	27		5. Certificate of Status Desired	1 1 7 7 7	
9. Nome and Address of Current Registered Agent 9. Nome and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Fursuant to this prodesons of Sections 617,0502 and 617,1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing the registered agent, or both, in the State of Florids. Such change was authorized by the corporation submits this statement for the purpose of changing the registered agent. I am familiar with, and accept the obligations of, Section 617,0502 and 617,1508. Florids Statutes. The above named corporation submits this statement for the purpose of changing the registered agent. I am familiar with, and accept the obligations of, Section 617,0503. Florids Statutes. SCONATURE To Post Registered Agent (and the production of the first State of Rockets agent a	23		28			,		
HOGAN, GARLAND, ESO. 300 E LAS OLAS BLVD 2ND FL FT. LAUDERDALE FL 33301 82 Synet Markers PD. Dean Number is Not Acceptable) 83 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the approximant as registered office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby accept the approximant as registered office or registered agent, and accept the opporation in the state of directors. I hereby accept the approximant as registered agent, I am for a school of directors. I hereby accept the approximant as registered agent, I am for the purpose of changing its registered added agent of directors. I hereby accept the approximant as registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered agent, I am for the purpose of changing its registered a	24 ZIP	25	25 29 30		у	Florida Statutes		
HOGAN, GARLAND, ESO. 300 E LAS OLAS BLVD 2ND FL FT. LAUDERDALE FL 33301 BASE Crystal Lake FL BS Stopt Address PO. Box Number is Not Acceptable) Stop Lazy Lake FL BS Stopt Address PO. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or born, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a demonstration of 17,0503, Horizon 812, 1508, Florida Statutes. SIGNATURE SIGNATURE DEFENSION DIRECTORS IN 12 DEFENSION DIRECTORS IN 12 DEFENSION DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 DEFENSION DIRECTORS IN 12 13. AODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME MASCOLA, PATRICK SIRET ADDRESS SIGNATURE POMPAND BEACH FL LABONTE, RENEE SI CAYUGA RD TILL LABONTE, RENEE SI CAYUGA RD TILL LABONTE, RENEE SI CAYUGA RD TILL SUDERDALE FL SO WILLIS, BUNNY LABONTE, RENEE SI CAYUGA RD TILL LABORTOALE FL SO WILLIS, BUNNY LABONTE, RENEE SI CAYUGA RD TILL LABONTE, RENEE SI CAYUGA RD TI		9. Name and Address of Curr	ent Registered Agent		.1	10. Name and Address of New I	Registered Agent	
300 E LAS OLAS BLVD 2ND FL FT. LAUDERDALE FL 33301 80 81 82 2200 Lazy Lane 83 84 Cry Lazy Lake FL 85 85 87 88 88 88 89 89 89 89 89 89		A.B		8		(same) Hogan, Garland	l. ESO	
FT. LAUDERDALE FL 33301 89 PM City Lazy Lake FL 85 Zp Code 33305 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutas, the above-named corporation submits this statement for the purpose of changing its registered difce or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the colligations of, Section 617.1508, Florida Statutas, the above-named corporation submits this statement for the purpose of changing its registered difce or registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the colligations of, Section 617.1508, Florida Statutas, the above-named corporation submits this statement for the purpose of changing its registered difce or registered agent. I am submits this statement for the purpose of changing its registered difce. The state of Florida. Such change should be appointed agent, or both, in the State of Florida. Such change should be appointed agent, or both, in the State of Florida. Such change should be appointed agent, or both, in the State of Florida Statutas. The proposed Agent appointed agent, or both, in the State of Florida Statutas. 12.	HOGAN, GARLAND, ESQ.				Street Address P.O. Rox Number is Not Acceptable)			
11. Fursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617.0502 holds Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE PD MASCOLA, PATRICK SIERET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. SIERET ADDRESS OFF. ST. 2P NAME MASCOLA, PATRICK MASCOLA, PATRICK SIERET ADDRESS OFF. ST. 2P POMPANO BEACH FL 1. ST. 22 SAME 1. ST. 22 SAME	300 E LAS OLAS BLVD 2ND FL				2200	Lazy Lane		
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11. Pursuant to the provisions of Sections 617 (5002 and 617.1500. Florida Statutios, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floridas. Such nange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am formalist with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE				*	• City	Lazv Lake	F) 85 4	p Code 3305
The properties and except the obligations of, Section 617-0503, Florida Statutes. Signature Signa	11. Pursuant t	to the provisions of Sections 617.05	02 and 617.1508, Florida Statutes	s, the above	-pamod co	progration authority this statement for the se-		
SIGNATURE Signat	or register familiar wit	red agent, or both, in the State of Fig.	orida. Such change was authorize ection 617,0503. Florida Statutas	d by the cor	poration's	board of directors. I hereby accept the app	cointment as registered	d agent. I am
Syram. S		on and decopt the obligations of, be	citori o 17.0000, Florida Statutes.					
12. OFFICERS AND DIRECTORS 11. INTE PD		Signature, typed or printed name of registered ag	ent and title if applicable. (NOT)	E: Registered Ag	ent skonature re	sourced when reinstation)	DATE	
Title								DRS IN 12
NAME MASCOLA, PATRICK 880 S.W. 10TH AVENUE 13 STREET ADDRESS 880 S.W. 10TH AVENUE 14 CITY-ST-2IP POMPANO BEACH FL 14 CITY-ST-2IP	TITLE	PD						,
STREET ADDRESS S80 S.W. 10TH AVENUE 13.STREET ADDRESS 14.GITY-SI-ZIP	NAME	MASCOLA, PATRICK			:			
POMPANO BEACH FL 14.CITY-SIT-ZIP 15.CITY-SIT-ZIP 16.CITY-SIT-ZIP 16.CITY-SIT-ZIP 16.CITY-SIT-ZIP 17.CITY-SIT-ZIP 17.CITY-SIT-ZIP 17.CITY-SIT-ZIP 17.CITY-SIT-ZIP 17.CITY-SIT-ZIP 17.CITY-SIT-ZIP 18.CITY-SIT-ZIP 1	STREET ADDRESS	OOO CAN ACTUA ANTANIE						
HILE LABONTE, RENEE SI CAYUGA RD . 23 STREET ADDRESS 51 CAYUGA RD . 24 CITY-ST-2P FT. LAUDERDALE FL . 27 LAUDERDALE FL . 28 LAUDERDALE FL . 29 LAUDERDALE FL . 29 LAUDERDALE FL . 29 LAUDERDALE FL . 29 LAUDERDALE FL . 30 LAU								
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and those not qualify for the exemption stated in Section 110 OZGWA Facille State to 15 of the	STREET ADDRESS			6.3 STREE	T ADDRESS			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 O7(2)/45 Everide State of 1.5 above.	CITY-ST-ZIP			6.4 CITY -	ST-ZIP			
	14. I do hereby	y certify that the information supplied	d with this filing is voluntarily furnis	hed and do	e not ougl	lify for the exemption stated in Section 119	.07(3)(k), Florida Statut	es. I further

certify that the information indicated on this arindal report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/94 (954)561-5882

R2E037 (12/95)