## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002068

FILED Jan 24, 2009 Secretary of State

Entity Name: WALENSTEIN MUSICAL ORGANIZATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

19040 N.W. 57TH AVE, SUITE 201 2817 NW 168TH TERRACE HIALEAH, FL 33015 MIAMI GARDENS, FL 33056 US

**Current Mailing Address: New Mailing Address:** 

19040 N.W. 57TH AVE, SUITE 201 2817 NW 168TH TERRACE HIALEAH, FL 33015 MIAMI GARDENS, FL 33056 US

FEI Number: 65-0669331 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STARR, GREGORY S 601 S ANDREWS AVE 2ND FL

FT LAUDERDALE, FL 33301 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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** (X) Change ( ) Addition

() Delete JOSEPH. ROMEL JOSEPH, ROMEL Name: Name:

19040 NW 57TH AVE SUITE 201 Address: 2817 NW 168TH TERRACE Address: City-St-Zip: MIAMI, FL 33015 City-St-Zip: MIAMI GARDENS, FL 33056

Title: ( ) Delete Title: () Change () Addition

LACROIX, MARK Name: Name: Address: 8837 ANDORA DRIVE Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip:

Title: () Delete Title: () Change () Addition

BONILLA, NANETTE Name: Name: 18320 NE 8TH AVE Address: Address:

NORTH MIAMI BEACH, FL 33179 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

Name: MICHEL, ARCHANGE Name: 19040 NW 57TH AVE SUITE 201 Address: Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip:

Title: () Delete Title: () Change () Addition

TINHOMME, JOLIUS Name: Name: 2817 NW 168 TER Address: Address: MIAMI GARDENS, FL 33056 City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition

GERSHFELD, YELENA Name: Name: Address: 780 NE 69 ST APT 2008 Address: MIAMI, FL 3313 City-St-Zip: 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: ROMEL JOSEPH E.D. 01/24/2009

Electronic Signature of Signing Officer or Director

Date