


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Jul 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N99000003025
 1. Entity Name
ETHNIC MUSIC AND THEATRICAL SOCIETY, INC.



Principal Place of Business Mailing Address
8850 NW 17TH STREET **8850 NW 17TH STREET**
PLANTATION, FL 33322 **PLANTATION, FL 33322**

DO NOT WRITE IN THIS SPACE



07032007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0918752	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

MATOS, ALEXANDER
8850 NW 17TH STREET
PLANTATION, FL 33322

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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 September 14, 2007

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

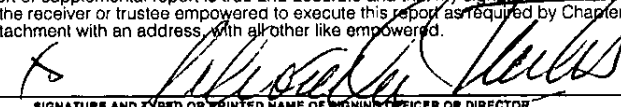
U00000767002
 07/05/07-90007-002 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MATOS, ALEXANDER
STREET ADDRESS	8850 NW 17TH STREET
CITY-ST-ZIP	PLANTATION, FL 33322
TITLE	D
NAME	MATOS, BERNICE
STREET ADDRESS	8850 NW 17TH STREET
CITY-ST-ZIP	PLANTATION, FL 33322
TITLE	D
NAME	DIMINO, DEBRA
STREET ADDRESS	10532 N.W. 10TH COURT
CITY-ST-ZIP	PLANTATION, FL 33322
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 all other like empowered.

SIGNATURE:  **7/2/07** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #