

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746035

**Entity Name:** MIAMI MUSIC TEACHERS FOUNDATION, INC.

**FILED**  
**Apr 29, 2015**  
**Secretary of State**  
**CC1943504950**

**Current Principal Place of Business:**

C/O SANCHEZ  
15020 SW 53 TERRACE  
MIAMI, FL 33185

**Current Mailing Address:**

15020 SW 53 TERRACE  
MIAMI, FL 33185 US

**FEI Number: 59-1890244**

**Certificate of Status Desired: No**

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

SANCHEZ, DEBORA  
15020 SW 53 TERRACE  
MIAMI, FL 33185 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

**Officer/Director Detail :**

Title           PRESIDENT  
Name           CUENCA, CARMEN  
Address        8810 SW 17TH ST.  
City-State-Zip: MIAMI FL 33165

Title           SECOND VICEPRESIDENT  
Name           DIAZ, OSCAR  
Address        701 NE 72 STREET  
City-State-Zip: MIAMI FL 33138

Title           TREASURER  
Name           GONZALEZ, MARIANELA  
Address        15020 SW 53 TERRACE  
City-State-Zip: MIAMI FL 33185

Title           FIRST VICEPRESIDENT  
Name           NGO, NIGHTINGALE  
Address        6890 SW 128 ST  
City-State-Zip: MIAMI FL 33156

Title           PRESIDENT ELECT  
Name           JENSEN, ZELDA  
Address        154 W. SUNRISE AVE.  
City-State-Zip: CORAL GABLES FL 33133

Title           DIRECTOR  
Name           WALSH, MEGAN  
Address        50 SW 10 ST #814  
City-State-Zip: MIAMI FL 33130

Title           THIRD VICEPRESIDENT  
Name           RODRIGUEZ, ANA  
Address        581 E. 38 ST  
City-State-Zip: HIALEAH FL 33013

Title           CORRESPONDING SECRETARY  
Name           GARCIA, MARGARITA  
Address        15020 SW 53 TERRACE  
City-State-Zip: MIAMI FL 33185

**Continues on page 2**

*I hereby 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 all other like empowered.*

**SIGNATURE: MARIANELA GONZALEZ**

**TREASURER**

**04/29/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            RECORDING SECRETARY  
Name            BERBERIAN, MARINA  
Address        436 ALMERIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134