

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750200

Entity Name: GABLESTAGE, INC.**Current Principal Place of Business:**1200 ANASTASIA AVE., STE. 230
CORAL GABLES, FL 33134**Current Mailing Address:**1200 ANASTASIA AVE., STE.230
CORAL GABLES, FL 33134 US**FEI Number:** 59-1972774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ADLER, JOSEPH
1200 ANASTASIA AVE., STE.230
CORAL GABLES, FL 33134 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	WEINGER, STEVEN M
Address	2650 SW 27TH AVENUE
City-State-Zip:	MIAMI FL 33133

Title	TREASURER
Name	OSIASON, LEE
Address	10642 SW 77 AVENUE
City-State-Zip:	MIAMI FL 33156

Title	SECRETARY
Name	SHULACK, GRETA
Address	7550 SW 102 STREET
City-State-Zip:	PINECREST FL 33156

Title	PRODUCING ARTISTIC DIRECTOR
Name	ADLER, JOSEPH
Address	1200 ANASTASIA AVE. SUITE 230
City-State-Zip:	CORAL GABLES FL 33134

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: JOSEPH ADLER**PRODUCING ARTISTIC
DIRECTOR****02/05/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date