

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01505

**Entity Name:** YOUNG PATRONESSES OF THE OPERA, INC.**Current Principal Place of Business:**8390 N.W. 25TH ST  
C/O FLORIDA GRAND OPERA  
MIAMI, FL 33122**Current Mailing Address:**8390 N.W. 25TH ST  
C/O FLORIDA GRAND OPERA  
MIAMI, FL 33122 US**FEI Number:** 59-2376906**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LOTT, LESLIE  
C/O LOTT & FISCHER, PL  
355 ALHAMBRA CIRCLE SUITE 1100  
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	BEAL, RENE
Address	1311 GRANADA BLVD.
City-State-Zip:	CORAL GABLES FL 33134

Title	FINANCIAL SECRETARY
Name	SOLH, AMAL
Address	50 BISCAYNE BLVD. #4910
City-State-Zip:	MIAMI FL 33132

Title	CORRESPONDING SECRETARY
Name	SCHMIED, BEATE
Address	1231 CAMPO SANO AVE.
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	PINON, GAIL
Address	1225 ALEGRIANO AVE.
City-State-Zip:	CORAL GABLES FL 33146

Title	RECORDING SECRETARY
Name	SANCHEZ DE VARONA, MARIA
Address	8790 SW 54TH AVENUE
City-State-Zip:	MIAMI FL 33143

Title	TREASURER
Name	AUERBACHER, LAUREL
Address	16824 SW 80 COURT
City-State-Zip:	MIAMI FL 33157

*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:** GAIL PINON

VICE PRESIDENT

02/13/2016

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