# 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: MYRNA MEEROFF

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

## **Officer/Director Detail :**

	Title	Ρ	Title	VP
	Name	MEEROFF, MYRNA L	Name	SCHWARTZ, MARIE L
	Address	1630 NW 48 PL	Address	971 WINWOARD WAY
	City-State-Zip:	DEERFIELD BEACH FL 33064	City-State-Zip:	WESTON FL 33327
	Title	S		
	Name	ARON, ELIZABETH H		
	Address	796 HERITAGE DR		
	City-State-Zip:	WESTON FL 33326		

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.

# DEERFIELD BEACH. FL 33064

DOCUMENT# N1300002299

1630 NW 48 PL

1630 NW 48 PL

**Current Principal Place of Business:** 

## FEI Number: 46-2349074

DEERFIELD BEACH, FL 33064

**Current Mailing Address:** 

## Name and Address of Current Registered Agent:

Entity Name: SOUTH FLORIDA CHAMBER ENSEMBLE, INC.

MEEROFF, MYRNA L 1630 NW 48 PL DEERFIELD BEACH, FL 33064 US

## FILED Feb 01, 2014 Secretary of State CC5440678904

Certificate of Status Desired: Yes

Date

02/01/2014

Date

EXECUTIVE DIRECTOR