FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 22 AM 9:07

DOCUMENT # 709249 (7)

1. Corporation Name
THE GREATER MIAMI MARCHING STRING BAND, INC.

Principal Place of Business	Mailing Address
~~ATTN: SADIE KUSHNER~~ ~~1261 NE 112TH STREET~~ ~~MIAMI FL 33161~~	~~ATTN: SADIE KUSHNER~~ 1261 NE 112TH STREET MIAMI FL 33161

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/01/1965
3a. Date of Last Report: 04/06/1994
4. FEI Number: 59-6178968 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 N.M.B. HIGH SCHOOL	26 GEORGE HELKER
Suite, Apt. #, etc. 22 1247 NE 167TH STREET	Suite, Apt. #, etc. 27 1261 NE 112TH STREET
City & State 23 NORTH MIAMI BEACH	City & State 28 MIAMI FL
Zip / Country 24 33162 / 25 FL U.S.A.	Zip / Country 29 33161 / 30 U.S.A.

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~ETTINGER, WILLIAM~~
~~120 SW 65TH WAY~~
~~PEMBROKE PINES FL 33023~~

10. Name and Address of New Registered Agent

81 Name: GEORGE HELKER
82 Street Address (P.O. Box Number is Not Acceptable)
83: 1261 NE 112TH STREET
84 City: MIAMI FL 85 Zip Code: 33161

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: George Helker PRESIDENT 3-15-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	ETTINGER, WILLIAM
STREET ADDRESS	120 SW 65TH WAY
CITY-ST-ZIP	PEMBROKE PINES FL 33023
TITLE	TR
NAME	HELKER, GEORGE
STREET ADDRESS	1261 NE 112TH STREET
CITY-ST-ZIP	MIAMI FL 33161
TITLE	VT
NAME	SAMUELS, RHODA
STREET ADDRESS	20240 NE 3RD COURT 5
CITY-ST-ZIP	MIAMI FL 33179
TITLE	TR
NAME	VARGA, JULIUS
STREET ADDRESS	17505 NORTH BAY ROAD 328
CITY-ST-ZIP	MIAMI FL 33160
TITLE	S
NAME	KUSHNER, SADIE
STREET ADDRESS	401 OCEAN DRIVE 405
CITY-ST-ZIP	MIAMI FL 33139
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	P/D	☒ Change ☐ Addition
1.2 NAME	~~GEORGE~~ HELKER, GEORGE	
1.3 STREET ADDRESS	1261 NE 112TH STREET	
1.4 CITY-ST-ZIP	MIAMI FL 33161	
2.1 TITLE	S/T	☒ Change ☐ Addition
2.2 NAME	KUSHNER, SADIE	
2.3 STREET ADDRESS	401 OCEAN DRIVE 405	
2.4 CITY-ST-ZIP	MIAMI FL 33139	
3.1 TITLE	T	☐ Change ☐ Addition
3.2 NAME	VARGA, JULIUS	
3.3 STREET ADDRESS	17505 NORTH BAY ROAD 328	
3.4 CITY-ST-ZIP	MIAMI FL 33160	
4.1 TITLE	V/T	☐ Change ☐ Addition
4.2 NAME	SAMUELS, RHODA	
4.3 STREET ADDRESS	20240 NE 3RD COURT 5	
4.4 CITY-ST-ZIP	MIAMI FL 33179	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sadie Kushner 3-15-95 (305) 673-8972
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SADIE KUSHNER SECRETARY

0043633