

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721894

1. Entity Name

MIAMI CHORAL SOCIETY, INC.

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90018 012 ****61.25

Principal Place of Business

Mailing Address

1533 SUNSET DR
STE 215
CORAL GABLES FL 33143
US

1533 SUNSET DR
STE 215
CORAL GABLES FL 33143
US

00021240



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7250811

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOUMIET, LUCRECIA
1033 ANASTASIA AVE.
CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Delete
PCD
BROOKES, ROBERT
STREET ADDRESS 701 BRICKELL AVE, STE 1200
CITY-ST-ZIP MIAMI FL 33131

TITLE NAME ☐ Change ☒ Addition
D
Davis, Robert T.
STREET ADDRESS 1500 Biscayne Blvd., Suite 317
CITY-ST-ZIP Miami, FL 33132

TITLE NAME ☐ Delete
SD
FISHER, DEBORAH
STREET ADDRESS 13040 SW 70 AVE
CITY-ST-ZIP MIAMI FL 33156

TITLE NAME ☐ Change ☒ Addition
D
Irl, H. James
STREET ADDRESS 260 Glenridge Road
CITY-ST-ZIP Key Biscayne, FL 33149

TITLE NAME ☐ Delete
TD
LOUMIET, JUAN P
STREET ADDRESS 1221 BRICKELL
CITY-ST-ZIP MIAMI FL 33131

TITLE NAME ☐ Change ☒ Addition
D
Kaplan, Betsy
STREET ADDRESS 1450 NE 2nd Avenue
CITY-ST-ZIP Miami, FL 33132

TITLE NAME ☐ Delete
D
M. CRISTINA DE LA VEGA
STREET ADDRESS 44 W FLAGLER ST
CITY-ST-ZIP MIAMI FL 33130

TITLE NAME ☐ Change ☒ Addition
D
Scheibe, Dr. Jo-Michael
STREET ADDRESS 1314 Miller Drive
CITY-ST-ZIP Coral Gables, FL 33146

TITLE NAME ☐ Delete
D
DEMBERG, JENNIFER
STREET ADDRESS 1221 BRICKELL
CITY-ST-ZIP MIAMI FL 33131

TITLE NAME ☐ Change ☐ Addition
D
[Blank]
STREET ADDRESS [Blank]
CITY-ST-ZIP [Blank]

TITLE NAME ☐ Delete
VD
STICKNEY, TIMOTHY P
STREET ADDRESS 104 CRANDON BLVD STE 309
CITY-ST-ZIP KEY BISCAINE FL 33149

TITLE NAME ☐ Change ☐ Addition
D
[Blank]
STREET ADDRESS [Blank]
CITY-ST-ZIP [Blank]

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Robert Brookes 1/12/02 305-358-5300 ext. 270

CR2E037 (9/01)