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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 756686

(2)

MIAMI CHAMBER SYMPHONY, INC.				 	III. BOBN BIBN BIBN BIBN BIBN BIBN BIBN BIBN
	4.D. sinore	Mailing Address			
Principal Place of Business		Ť			
5690 N KENDALL DR Miami Fl 33156		999 PONCE DE LEON BLYD SUITE 1000 CORAL GABLES FL 33134 US			Co. Data of Land Daniel
				3. Date Incorporated or Qualified 03/09/1981	3a. Date of Last Report 03/20/1995
Principal Plac	e of Business	2a. Mailing Address	120 Chank	4. FEI Number	Applied For Not Applicable
		26 901 NE 125 STYDET		59-2220937	\$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Oily & State		28 N. MI	AMITC	Trust Fund Contribution	Added to Fees
Zip	Country	7221	30 Country SA	This corporation has liability for in Florida Statutes	itangible tax under s. 199.032, Yes No
	9. Name and Address of Curre	29 20 6	[30] V(J/)	10. Name and Address of New Re	gistered Agent
	9. Name and Address of Curre	all Dediziolea vacin	81 Name 🛦 /	100 al 1 50	
				A K (AN A . SC)	HWEILER
SCHWEIG	SER, MARIAN A		82 Street Add	ress (P.O. Box Number is Not Acceptable	treet
	CE DE LEON BLVD		83	109	
SUITE 10			ح الم	une 101	
	SABLES FL 33134		84 City	MIAMI	FL 5 3316/
Pursuant to	the provisions of Sections 617.050	02 and 617.1508, Florida Statu	ites, the above-named corpo	oration submits this statement for the purp and of directors. I hereby accept the appo	oose of changing its registered of
	THE PROVISIONS OF COMMONS ATTENDED			ard of directors. Thereby accept the appu	intillent as registered agent. Fair
or registere	ed agent, or both, in the State of Flo	orida. Suchichange was author orign 617 503. Florida Status	sized by the corporation's boa	مسير	1. 61
or registere familiar with	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec	orida. Suchichange was author otion 617,0503, Florida Staty (es by the corporation's boa	uration submits this statement for the purp and of directors. Thereby accept the appo	13 F16
or registere familiar with GNATURE	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec Signature, typed or printed nume of registered age	orida. Such change was author ction 617,0503, Florida Statule sit and title I applicable (**)	ized by the corporation's Doz es NOTI Pagetored Agent signal we require	ed when reatistatrial	DATE
or registere familiar with GNATURE	on agent, or both, in the State of the h, and accept the obligations of, Sec	ction 617 0503, Florida Statute fit and that I applicable (IND DIRECTORS	NOTIFIEGSTERED Agent signal no recount	5,	DATE CERS AND DIRECTORS IN 12
or registere familiar with	on agent, or both, in the State of the h, and accept the obligations of, Sec	ction 617 0503, Florida Statule	NOTIF Registered Agent Signal No (Scium) 13. 11 TifLE 7	ed when reatistatrial	DATE CERS AND DIRECTORS IN 12
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SIGNATURE:

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305-89/-/442_