

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0005758

DOCUMENT # 767883

1. Entity Name

PALM SPRINGS BAND PARENTS ASSOCIATION, INC.



FILED

03 SEP 30 AM 8:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

1025 W. 56 PLACE  
HIALEAH FL 33012

Mailing Address

P. O. BOX 22429  
HIALEAH FL 33002

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number ~~NOT APPLICABLE~~  
30-018281

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SOLER, MARIA E  
6481 WEST 9TH AVENUE  
HIALEAH FL 33012

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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  
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOLER, MARIA E 6481 WEST 9TH AVENUE HIALEAH FL 33012	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RODRIGUEZ, OLGA LIDIA 6080 EAST 4TH AVENUE HIALEAH FL 33013	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PALACIOS, JOSE 17325 N.W. 78TH COURT MIAMI FL 33015	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CABRERA, MARIA 2774 W. 60TH STREET MIAMI FL 33016	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD UGALDE, ROSY 1261 W 61 PLACE HIALEAH FL 33012	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SOSA, ROSIE 1270 W 60 TERRACE HIALEAH FL 33012	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PULGARIN, CARMEN 525 W 69 STREET #208 HIALEAH FL 33014	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

*[Signature]* PRESIDENT

9/20/03

305-824-0470

CR2E037 (4/03)

# Palm Springs Band Parents Association, Inc.

Maria Elena Soler  
Band Parent President

John Normandin  
Band Director

September 20, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Palm Springs Band Parents Association, Inc.  
Document #767883  
2003 Not-For-Profit Corporation

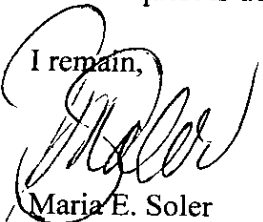
Dear Sirs:

We respectfully request an abatement of the of the reinstatement fee. As this Association is for a school band program, much of the mail is not picked up from the P.O. Box during the summer months. Unfortunately, the 2003 UBR Report was not properly channeled due to the transition of the new Executive Board.

Your consideration would be greatly appreciated because our operating funds are very limited during the first months of the school year. Therefore, we are enclosing our check in the amount of \$61.25 to cover the filing fee for 2003.

If our request is denied, please advise us of the balance due. Thanking you in advance,

I remain,



Maria E. Soler  
Band Parent President

P. O. Box 22429  
Hialeah, FL 33002