2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005961

Entity Name: ARS FLORES CHAMBER ORCHESTRA, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

912 EAST BROWARD BLVD. FT. LAUDERDALE, FL 33301

Current Mailing Address: New Mailing Address:

912 EAST BROWARD BLVD. FT. LAUDERDALE, FL 33301

FEI Number: 91-2078222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCE, BURT 912 EAST BROWARD BLVD. FT. LAUDERDALE, FL 33301 US

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 MCAULIFFE, MARILYN
 Name:
 SUTER, LUCY

 Address:
 19060 NE 21 AVE
 Address:
 1475 WEEPING WILLOW WAY

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 HOLLYWOOD, FL 33019

Title: DS () Delete Title: (X) Change () Addition PEREZ-RUDISILL, MARIA Name: BAHLER, LESLIE J Name: Address: 138 GARDEN PARKWAY Address: 8742 NW170 TERR City-St-Zip: WILLIAMSVILLE, NY 14221 City-St-Zip: MIAMI, FL 33018

Title: DT () Delete Title: () Change () Addition

 Name:
 LUCE, BURT
 Name:

 Address:
 2408 SUNRISE KEY BLVD.
 Address:

 City-St-Zip:
 FT. LAUDERDALE, FL 333043828
 City-St-Zip:

 $\label{eq:time_state} {\sf Title:} \qquad {\sf DS} \qquad (\) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf DV} \qquad ({\sf X}) \ {\sf Change} \ (\) \ {\sf Addition}$

 Name:
 PEREZ-RUDISILL, MARIA
 Name:
 ANDADAI, ROBERT

 Address:
 8742 NW 170 TERR
 Address:
 8877 COLLINS AVE

 City-St-Zip:
 HIALEAH, FL 33018
 City-St-Zip:
 MIAMI BEACH, FL 33154

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BURT LUCE DT 04/30/2004