2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005961

Apr 27, 2006 Secretary of State

Entity Name: ARS FLORES SYMPHONY ORCHESTRA, INC.

Current Principal Place of Business: New Principal Place of Business: 912 EAST BROWARD BLVD 1350 EAST SUNRISE BLVD. FT. LAUDERDALE, FL 33301 SUITE 126 FT. LAUDERDALE, FL 33304 **Current Mailing Address: New Mailing Address:** 1350 EAST SUNRISE BLVD SUITE 126 FT. LAUDERDALE, FL 33304 FEI Number: 91-2078222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: LUCE, BURT LUCE, BURT 912 EAST BROWARD BLVD. 1350 ÉAST SUNRISE BLVD. US FT. LAUDERDALE, FL 33301 SUITE 126 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: BURT LUCE 04/27/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SUTER, LUCY Name: Name: 1475 WEEPING WILLOW WAY Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: DS () Delete Title: () Change () Addition PEREZ-RUDISILL, MARIA Name: Name: Address: 8742 NW170 TERR Address: City-St-Zip: MIAMI, FL 33018 City-St-Zip: Title: DT () Delete Title: () Change () Addition LUCE, BURT Name: Name: 2408 SUNRISE KEY BLVD. Address: Address: City-St-Zip: FT. LAUDERDALE, FL 333043828 City-St-Zip: Title: DV () Delete Title: () Change () Addition Name: ANDADAI, ROBERT Name: Address: 8877 COLLINS AVE Address: City-St-Zip: MIAMI BEACH, FL 33154 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 04/27/2006