## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000005961

FILED Sep 02, 2008 Secretary of State

Entity Name: ARS FLORES SYMPHONY ORCHESTRA, INC.

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

1350 EAST SUNRISE BLVD. 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 ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LUCE, BURT LUCE, BURT

1350 ÉAST SUNRISE BLVD. 2408 SUNRISE KEY BOULEVARD SUITE 126 FORT LAUDERDALE, FL 33304 US

FT. LAUDERDALE, FL 33304 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 09/02/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition LUCE, BURT LUCE, BURT Name: Name:

2408 SUNRISE KEY BLVD. Address: 2408 SUNRISE KEY BOULEVARD Address: City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33304 US

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

PEREZ-RUDISILL, MARIA Name: Name: MOE, JENS

Address: 8742 NW170 TERR Address: 1350 E SUNRISE BOULEVARD, SUITE 126 City-St-Zip: MIAMI, FL 33018 City-St-Zip: FORT LAUDERDALE, FL 33304 US

Title: DV () Delete Title: DS (X) Change ( ) Addition MOE, JENS Name: PEREZ-RUDISILL, MARIA Name:

1565 SOUTH OCEAN LANE, APT. 277 1350 E SUNRISE BOULEVARD, SUITE 126 Address: Address: City-St-Zip: FT. LAUDERDALE, FL 33316 City-St-Zip: FORT LAUDERDALE, FL 33304 US

I hereby certify that the information supplied with this filing does not qualify 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 D 09/02/2008