

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 17, 2002 8:00 am**  
**Secretary of State**

04-17-2002 90057 016 \*\*\*\*61.25

**DOCUMENT # NO1000000768**

1. Entity Name

**MIAMI PAN SYMPHONY STEEL ORCHESTRA 2001, INC.**

Principal Place of Business

Mailing Address

10755 SOUTHWEST 190TH STREET  
 BAY 61  
 MIAMI FL 33189

10755 SOUTHWEST 190TH STREET  
 BAY 61  
 MIAMI FL 33189

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-1074872**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SPIEGEL & UTRERA, P.A.**  
**343 ALMERIA AVENUE**  
**CORAL GABLES FL 33134**

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.

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**

9. Election Campaign Financing  
 Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD**  Delete  
 NAME **BANNATYNE, DEBRA**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **VD**  Delete  
 NAME **BARNETT, CAROL**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **S**  Delete  
 NAME **DUVERNEY, GAIL**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **T**  Delete  
 NAME **BANNATYNE, ANDREW**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D**  Delete  
 NAME **FERMIN, CARL**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D**  Delete  
 NAME **MOORE, CHRIS**  
 STREET ADDRESS **10755 SOUTHWEST 190TH STREET**  
 CITY-ST-ZIP **MIAMI FL 33189**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Andrew Bannatyne*  
**ANDREW BANNATYNE**

**ANDREW BANNATYNE**  
**4/5/02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Paytime Photo #

CR2E037 (9/01)