## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007973

FILED Feb 09, 2009 Secretary of State

Entity Name: AMERICAN CHILDREN'S ORCHESTRAS FOR PEACE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 801 S.W. 3RD AVENUE **SUITE #308** MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 801 S.W. 3RD AVENUE SUITE #308 MIAMI, FL 33130 FEI Number: 65-1151715 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: SANTANDER, MAIDA 801 SW 3RD AVE **SUITE #308** MIAMI, FL 33130 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: () Delete () Change () Addition SANTANDER, MAIDA Name: Name: 520 BRICKELL KEY DR., APT. 910 Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: D/CH () Delete Title: B/CH (X) Change ( ) Addition NOBEL, MICHAEL Name: NOBEL, MICHAEL Name: Address: 3211 PONCE DE LEON BLVD., SUITE 210 Address: 3211 PONCE DE LEON BLVD., SUITE 210 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: () Change () Addition VIERA, JORGE Name: Name: 700 BRICKELL AVENUE Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: D/S ( ) Delete Title: () Change () Addition GACHISSIN, JORGE CARLOS Name: Name: 145 MADEIRA AVENUE, SUITE 314 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: DAC () Delete Title: BAVC (X) Change ( ) Addition DIAZ, RAFEAL Y Name: Name: DIAZ, RAFEAL Y 3211 PONCE DE LEON BLVD. SUITE 210 3211 PONCE DE LEON BLVD. SUITE 210 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: ( ) Change (X) Addition GONZALEZ, MIRTHA Name: Name: Address: Address: 15476 NW 77 CT. # 321 MIAMI LAKES,, FL 33016 City-St-Zip: City-St-Zip:

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: MAIDA SANTANDER MS. 02/09/2009