

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002152

FILED  
Mar 27, 2012  
Secretary of State

**Entity Name:** SOUTH FLORIDA FRIENDS OF CLASSICAL MUSIC, INC

**Current Principal Place of Business:**

11620 NW 43 TER  
DORAL, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

11620 NW 43 TER  
DORAL, FL 33178

**New Mailing Address:**

PO BOX 22637  
MIAMI, FL 33022

**FEI Number:** 27-5346907

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VIDAL, ADOLFO  
11620 NW 43 TER  
DORAL, FL 33178 US

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

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:**

Title: P  
Name: VIDAL, ADOLFO  
Address: 11620 NW 43 TER  
City-St-Zip: DORAL, FL 33178

Title: VP  
Name: BONACOSSA, FEDERICO  
Address: 13072 SW 108 ST CIRCLE  
City-St-Zip: MIAMI, FL 33186

Title: SECR  
Name: NEFODOVA, OLGA  
Address: 19968 NE 5 CT 1-E  
City-St-Zip: MIAMI, FL 33179

Title: A&ED  
Name: VIDAL, ADOLFO  
Address: 11620 NW 43 TER  
City-St-Zip: DORAL, FL 33178

Title: T  
Name: CAMPO, AISA  
Address: 9428 SW 4 LN  
City-St-Zip: MIAMI, FL 33174

I hereby 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 all other like empowered.

SIGNATURE: ADOLFO VIDAL

P

03/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date