

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 06, 2005 8:00 am
Secretary of State

06-06-2005 90001 023 ****61.25

DOCUMENT # N18255

1. Entity Name

FLORIDA INTERNATIONAL BALLET COMPANY, INC.



Principal Place of Business

7360 CORAL WAY
SUITE 29
MIAMI FL 33155
US

Mailing Address

63 SW 31 RD
MIAMI FL 33129

2. Principal Place of Business

63 SW 31 RD
MIAMI

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

Zip
33129

Country
DA DE

Zip

Country

4. FEI Number

59-2788348

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/04)

6. Name and Address of Current Registered Agent

GARCIA-TURINO, ROLANDO
1041 N.W. 32ND PL
MIAMI FL 33125

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	TOBIO, VIVIAN	
STREET ADDRESS	63 SW 31 ROAD	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SAINZ, TOBIO	
STREET ADDRESS	63 SW 31 ROAD	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE	STD	<input type="checkbox"/> Delete
NAME	SAINZ, JORGE	
STREET ADDRESS	265 DESOTO DRIVE	
CITY-ST-ZIP	MIAMI FL 33129	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Vivian Tobio P.D.* VIVIAN TOBIO P.D.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/30/05 3051854-4605

Date

Daytime Phone #