2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 AM
Secretary of State

DOCUMENT# N37514

Entity Name: THE INTERNATIONAL INSTITUTE OF VOCAL ARTS, INC.

Current Principal Place of Business:

365 WEST END AVE.
#9D
NEW YORK, NY 10024 US

New Principal Place of Business:

Current Mailing Address:

365 WEST END AVENUE
#9-D
NEW YORK, NY 10024 US

New Mailing Address:

FEI Number: 59-3014602 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUAGLIARDO, RICHARD
4305 W. CLEVELAND ST
TAMPA, FL 33604

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 ( ) Delete
Name: ALEXANDER, ELLEN
Address: 365 W END AVE, APT 9D
City-St-Zip: NEW YORK, NY

Title: V ( ) Delete
Name: DUNN, MIGNON
Address: 365 W END AVE, APT 11F
City-St-Zip: NEW YORK, NY

Title: T ( ) Delete
Name: STEELE, JANE
Address: 240 W 75TH ST., #8A
City-St-Zip: NEW YORK, NY 10023

Title: D ( ) Delete
Name: REYNOLDS, JERALD
Address: 11723 PRIMROSE LN
City-St-Zip: TEMPLE TERRACE, FL

Title: D (X) Delete
Name: GENTILESCA, FRANCO
Address: 2109 BROADWAY #1410
City-St-Zip: NEW YORK, NY

Title: D ( ) Delete
Name: SUSSMAN, WILLIAM
Address: 240 W. 75 ST #8A
City-St-Zip: NEW YORK, NY 10023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JANE STEELE T 04/18/2002

Electronic Signature of Signing Officer or Director Date