

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000000268

Entity Name: ALHAMBRA MUSIC, INC.

FILED  
Oct 10, 2009  
Secretary of State

## Current Principal Place of Business:

201 ALHAMBRA CIRCLE, SUITE 1050  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

2829 BIRD AVENUE SUITE 5  
P.O. BOX 290  
COCONUT GROVE, FL 33133

## New Mailing Address:

FEI Number: 65-0565230      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAUSER, HELEN ESQ  
201 ALHAMBRA CIRCLE, SUITE 1050  
CORAL GABLES, FL 33134      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: HELEN ANN HAUSER

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: ELDRIDGE, EVAN  
Address: 12562 NW 11TH LANE  
City-St-Zip: MIAMI, FL 33182

Title: D ( ) Delete  
Name: LAWRENCE, MILES  
Address: 10626 SW 102 ST  
City-St-Zip: MIAMI, FL 33176

Title: D ( ) Delete  
Name: MARXEN, DIANE  
Address: 16760 SW 301 ST  
City-St-Zip: HOMESTEAD, FL 33030

Title: V/D ( ) Delete  
Name: HAUSER, HELEN A  
Address: 3250 MARY STREET, SUITE 400  
City-St-Zip: COCONUT GROVE, FL 33133

Title: P/D ( ) Delete  
Name: GOODE, KENNETH  
Address: 90 EDGEWATER DRIVE, #726  
City-St-Zip: MIAMI, FL 33133

Title: T/S ( ) Delete  
Name: COPELAND, JANET  
Address: 824 CORTEZ STREET  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: GINSBERG, MYRON  
Address: 3917 CRAWFORD AVENUE  
City-St-Zip: MIAMI, FL 33133

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 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: HELEN ANN HAUSER

VP/D

10/10/2009

Electronic Signature of Signing Officer or Director

Date