## **FILE NOW: FILING FEE IS \$61.25**

Mailing Address

701 BRICKELL AVENUE SUITE 3000

MIAMI FL 33131-2847

**NONPROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

701 BRICKELL AVENUE

**SUITE 3000 MIAMI FL 33131** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 04 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date Incorporated or Qualified 04/19/1996

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N96000002155 (7)

## NEW WORLD SYMPHONY SUPPORTING FOUNDATION, INC.

		- 1 2 - 12 10 - 2 11 10 - 10 10 10 10 10 10 10 10 10 10 10 10 10			<del></del>		<del></del>	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number 65-066813		<del>                                     </del>	oplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1 62 CEEPOIS			ot Applicable Additional
22		27			5. Certificate of Status Desired		Fee Re	
City & Stat	City & State City & State				6. Election Campaign Financing		\$5.00	Мау Ве
23	28				Trust Fund Contribution		Added	to Fees
Ζιρ 24	Country Zip Co. 29 30				8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes			
Name and Address of Current Registered Agent					10. Name and Address of New F	tegistered /	Agent	
				Name	•			
INTRASTATE REGISTERED AGENT CORPORATION				2 Street Address (P.O. Box Number is Not Acceptable)				
701 BRICKELL AVENUE				33				
SUITE 3000								
MIAMI FL 33131				City			85 Zip (	Code
MIMINITE 65101				•		FL		
11. Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am jargitjar with, and accept the obligations of, Section 617.0503, Florida Statutes.								
agent. La	m familiar with, and accept the oblig	ations of, Section 617.0503, Flor	ida Statutes	the corpc	oration's board of directors, I hereby acc	ehr me abb	Diniment as	registered
GIGNATURE Clucked West								
Stighature, typed or profiled name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFF	ICERS AND		
TITLE	0	DELETE	1.1 TITLE				Change	Addition
NAME	1		1.2 NAME	]				
STREET ADDRESS	DENTITOLIGE TEL ALMI INDAEL DO 04540		1.3 STREET	ADDRESS				
CITY-ST-ZIP			1.4 CITY-S	T-ZiP			T 100	d database
TITLE	- <del>-</del>		21 TITLE				☐ Change	Addition
NAME	THOMAS, MICHAEL T		22 NAME	- 1				
STREET ADDRESS	541 LINCOLN ROAD		2.3 STREET					
CITY-ST-ZIP TITLE	MIAMI BEACH FL 33139	DELETE	2. 4 CITY-S 3.1 TITLE	T-ZIP			Change	Addition
	Weiser, Judy T	DELETE		-			F-K Citaline	LI MOUITON
NAME	541 LINCOLN ROAD		3.2 NAME					
STREET ADDRESS	MIAMI BEACH FL 33139		3.3 STREET	1				
CITY-ST-ZIP TITLE	D MIAMI BEAUTI PE 33 133	DELETE	3.4. CITY - S 4.1 TITLE		7 < 1/		Change	Addition
NAME	WEINSTEIN, ANDREW H	L DECENE	4.2 NAME	F	D, 5, V		M Augusto	LLI AGGILION
STREET ADDRESS	701 BRICKELL AVENUE, SUIT	F 3000	4.3 STREET	ADDOLOG				
CITY-ST-ZIP	MIAMI FL 33131	L 0000						
TITLE	D	DELETE	4.4 CITY - S 5.1 TIYLE		D.T		Change	Addition
NAMÉ	SCHNEIDER, SHELDON D		5.2 NAME		<i>D</i> , 1		74	
STREET ADDRESS	ADJOINTED HOUSE OUTP ASSA JOT HUGH OT		5.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131-2330		5.4 CITY-S	· · · · · · · · · · · · · · · · · · ·				
TITLE	P.D	DELETE	6.1 TITLE	. =:			Change	Addition
NAME	ADJENN ANICHOLY		6.2 NAME				-	, ~
STREET ADDRESS	ARISON, MICKEY 5275 NW 87 AVE	WHE	6.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMIL 12 531	X 2/13	6.4 CITY-S	T-ZIP				
14. I do herel	by certify that the information supplie	d with this filing does not qualify	for the exe	mption ste	ated in Section 119.07(3)(i), Florida Statu	tes. I further	certify that	the
14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachman with an address.								
appears in Block 12 or Block 13 if changed, or on an attachment with an address.								