SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

**NONPROFIT** CORPORATION ANNÙAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name N96000002811 (5)

MIAMI PAN SYMPHONY STEEL ORCHESTRA, INC.

APPROVED AND FILED

1997 OCT -6 PM 4:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Business Mailing Address							· · · · · · · · · · · · · · · · · · ·	r hearrigh bub reith eithi bairi barri barri bairi barri barri barri bibar 1910 (1901 (194)			
	10715 SW 190TH ST BAY 61 10715 SW 190TH ST BAY										
MIAMI FL 331	57		M	IAMI FL 33157				DO NOT WRITE	IN THIS SE	PACE	
								3. Date incorporated or Qualified 05/20/1996	3a. Date	of Last R	eport
2. Principal F	Place of Busin	ess	2a.	Mailing Address				4. FEI Number		Ar	plied For
21				26				65-0781867		No	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27								5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State         City & State           23         28								Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip		Country		Zip	Cou	intry		8. This corporation owes or has pa	id the curre		
24 25			29	າ ່ <u>├─</u> ┐ `				Personal Property Tax due June 30.  Yes No			
		and Address of Currer		lered Agent	1221	1		10. Name and Address of New Re		jent	
	"				-	81	Name				
JENNINGS, BRENDA 9355 SW 181ST TERRACE MIAMI FL 33157						82	Street Add	treet Address (P.O. Box Number is Not Acceptable)			
						83					
,	• • •						City		1	AF 7:-	Codo
					;	84	City		FL	85 Zip (	Code -
l office or a	registered ag	ons of Sections 617.050 ont, or both, in the State h, and accept the obligi	of Florid	da. Such channe was i	authorize	d hu	z the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of cot the appoi	hanging it ntment as	s registered registered
SIGNATURE					_		nde	home and star	alul	an	
SIGNATURE	Signature, typed	A JENNIN or printed name of registered ago	ant and trilo	If applicable (NO)	E Hogistere	d Age	oni signalura req	and when reinstaling	DATE		<del></del>
12.		OFFICERS AN	D DIREC		13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	DIRECT			☐ DELETE	1.1 ](	TLE			L	Change	Addition
NAME	CARL	FERMIN			1.2 N/	AME					
STREET ADDRESS	27100	SW 121 CT.			1.3 S1	TREET	ADDRESS	0000023	196	10-	8
CITY-ST-ZIP	Homes	tand, fl 33	037				ST-2/P	-10/14/9			
TITLE	DIRECT			☐ DELETE	2.1 10			*****61	.25 💆	举情病歲已	Addition
NAME	COKNE	l Duvern	84	1	2.2 N/						111
STREET ADDRESS	20784	SW 106 CT	_	a'	2.3 \$1	TREET	ADDRESS				
CITY-ST-ZIP	miam	SW 106 CT	9	l ocuses			ST - ZIP	······································	<u> </u>	7	170.000
TATLE	DIRECT	012		☐ DELET <b>E</b>	3.1 TI				L	_] Change	Addition
NAME	BRENI	DHINNET AC	15		3.2 N/						. 4.
( 1	1355	SW IBI TO	u		1		ADDRESS				
CITY ST-ZIP	miam	<u>, FL 3315</u>	<i>57_</i>	- December			ST-ZIP		· · · · · · · · · · · · · · · · · · ·	106000	T 1
TITLE				☐ DELETE	4.1 Ti				L	_ Change	Addition
NAME	l'				4. 2 N		ĺ				
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	- A # **			DELETE			11 - ZIP			7 Chasas	
TITLE	DIREC	TER WILLIA	ane	TEAL DEFEIF	5.1 TI		-		L	_ Change	Addition
NAME	Moulis	1 1 1 4 CT	n 3	•	5.2 N						
	7131 5	W 164 St					ADDRESS			٥	
CITY-ST-ZIP		1 FL 33	>	DELETE			iT-ZiP	<del></del>		<del></del>	-
TITLE	DIREC	TOR	,	TIME DELIE IE	6.1 TI				L	_ <b>%_682/</b>	L-MAGORIAN
NAME	FRED				6.2 N/					<b>1645</b>	<b>(</b> ει '
	20847	SW122 P					ADDRESS			ĮV	ŀ
CITY_CT. 7ID	ممشعب الممدا		-1-1		10.14.8	tv. c	מול_ד:			•	

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 eath; 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 attachment with an address.