


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 19, 2007 8:00 am
Secretary of State

01-19-2007 90044 001 *****8.75
01-19-2007 90044 002 *****61.25

DOCUMENT # N97000001915 1. Entity Name OPERATIC, CONCERT & THEATRE ARTISTS, INC.	
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Principal Place of Business 1315 S.W. 21ST STREET MIAMI, FL 33145	Mailing Address 1315 S.W. 21ST STREET MIAMI, FL 33145 US
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-NP CR2E037 (4/06)

4. FEI Number 66-0490854	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MADURGA, GONZALO 1315 S.W. 21ST STREET MIAMI, FL 33145

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MADURGA, GONZALO 1315 S.W. 21ST STREET MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LESTON, ERNESTO 1315 S.W. 21ST STREET MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GALVEZ, JOSEPH 821 CYPRESS BLVD - BLDG 99, APT 508 POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Gonzalo Madurga</i> GONZALO MADURGA	1-14-07	305858-0365
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>