

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000000177

1. Entity Name

EDWIN HOLLAND DANCE ENSEMBLE, INC.

Principal Place of Business

13631 N.W. 7TH AVE.
NORTH MIAMI, FL 33168 US

Mailing Address

13631 N.W. 7TH AVE.
NORTH MIAMI, FL 33168 US



04162004 No Chg-NP

CR2E037 (10/03)

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4. FEI Number

65-0886537

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOLLAND, EDWIN
850 N.W. 149TH TERRACE
MIAMI, FL 33168

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000119109
04/19/04-80087-019 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
HOLLAND, EDWIN
13631 N.W. 7TH AVE.
NORTH MIAMI, FL 33168

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
HOLLAND, GAILE
850 N.W. 149TH TERRACE
MIAMI, FL 33168

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
AUDAIN, SORAYA
2130 N.W. 132ND STREET
MIAMI, FL 33168

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 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 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:

Edwin S. Holland Edwin S. Holland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #