

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90204 010 ****70.00

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1. Entity Name

SOUTH BEACH GAY MEN'S CHORUS, INC.



Principal Place of Business

**736 LENOX AVE
#7
MIAMI BEACH FL 33139
US**

Mailing Address

**P.O. BOX 190209
MIAMI BEACH FL 33119-0209**

2. Principal Place of Business

20 ISLAND AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1509

City & State

MIAMI BEACH, FL

Zip

B3139

Country

MIAMI DADE

Zip

Country

4. FEI Number **65-0932623**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**FERREIRA, ROBERTO
736 LENOX AVENUE
#7
MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent

Name **ED STRAUB**

Street Address (P.O. Box Number is Not Acceptable)
20 ISLAND AVE #1509

City **MIAMI BEACH,**

FL

Zip Code **33139**

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

ED STRAUB, JR

1/20/03

Signature, typed or printed name of registered agent and fee (if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☒ Delete
NAME **FERREIRA, ROBERTO**
STREET ADDRESS **1550 JEFFERSON AVE #7**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **ROBERTSON, DAN**
STREET ADDRESS **750 ESPANOLA WAY #11**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPD** ☐ Delete
NAME **STRAUB, ED**
STREET ADDRESS **20 GLEAND AVE #1509**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **P** ☒ Change ☐ Addition
NAME
STREET ADDRESS **20 ISLAND AVE.**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ETZ, DAVID**
STREET ADDRESS **1450 LINCOLN ROAD**
CITY-ST-ZIP **MIAMI BEACH FL 33139**

TITLE **VP** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **FENSTERMACKER, FREDRIC**
STREET ADDRESS **6444 ALLISON RD**
CITY-ST-ZIP **MIAMI BEACH FL 33141**

TITLE ☒ Change ☐ Addition
NAME **FENSTERMACKER**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **KEVIN CLINE**
STREET ADDRESS **1670 BAY DR #4C**
CITY-ST-ZIP **MIAMI BEACH, FL 33139**

TITLE **D** ☐ Change ☒ Addition
NAME **CHRIS VERDUGO**
STREET ADDRESS **635 NE 71ST ST**
CITY-ST-ZIP **MIAMI, FL 33138**

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:

ED STRAUB, JR, PRESIDENT

1/20/03

305-695-0971

CR2E037 (10/02)