I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS PINERA

Electronic Signature of Signing Officer/Director Detail

FORT LAUDERDALE. FL 33334 **Current Mailing Address:** 

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FORT LAUDERDALE SYMPHONIC WINDS, INC.

7433 SILVER WOODS CT BOCA RATON, FL 33433

4250 NE 5TH AVENUE

DOCUMENT# N0500001325

**Current Principal Place of Business:** 

## FEI Number: 05-0612558

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CRAIG, SALLY 105 LAKE EMERALD DRIVE #516 OAKLAND PARK, FL 33309 US

**Officer/Director Detail :** 

V

TREASURER

PINERA, CARLOS

7433 SILVER WOODS CT

BOCA RATON FL 33433

504 GARDENS DRIVE - APT, 104

POMPANO BEACH FL 33069

NICKLAS, MICHELE

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.

Title

Title

Name

Address

Name

Address

City-State-Zip:

City-State-Zip:

Ρ

S

CRAIG, SALLY

ORVIETO, ANNE

209 N. BIRCH RD #502

FORT LAUDERDALE FL 33304

105 LAKE EMERIALD DRIVE #516

OAKLAND PARK FL 33309

## SIGNATURE:

City-State-Zip:

City-State-Zip:

Title

Title

Name

Address

Name Address

,					

02/21/2019

FILED Feb 21, 2019 Secretary of State 2781898843CC

Date

Certificate of Status Desired: No

TREASURER

Date