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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Sulle, Apt. #, etc. 28 Sulle, Apt. #, etc. 27 Sulle, Apt. #, etc. 28 Sulle, Apt. #, etc.	DOCU 1. Corporatio	MENT # 76212	1 (2)		·	7		
TOBS SW 47TH ST MAME FL 20155 US 3. Date Incorporated or Quarted Q2/25/1982 2. Principle Place of Eutimetos 2. A. Maining Address 2. Suite, Apr. 4. etc. 3. Su	FANTA	ASY THEATRE FACTORY, IN	C.			# 126(1) 18818 \$1118 1198; (1818 1188)	WAT OTOTT OLON ALIGN OLD	(14 6) 6 1 8 1616 3666
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2. Principal Packs of Business	US		us			3. Date Incorporated or Qualified	3a. Date of Last	t Report
2. Moning Address 2. Moning Address 3. EFINATION Applied 59-230097 No. Appl St. Appl No. Appl St. Appl No. Appl St. Appl No. Appl						•		
Suite, Apt. 8, etc. Suite, Apt. 8, etc.	¬ '	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
City & State		H obo				59-2230097		Not Applicable
City & State City & State City &		#, etc.	<u> </u>			5. Certificate of Status Desired		
Added to Fee 2p	City & State	е				6. Election Campaign Financing		
DULBERG, ROBERT A ESQ 100 S.E. 2ND STREET INTERNATIONAL PLAZA SUITE 2100 MIAMI FL 33156 1. Provision Statution of Sections 617,0502 and 617,1502, Perdia Statution International Plaza Suite 2100 MIAMI FL 33156 3. Street Address (P.O. Box Number is Not Acceptable) 1. Provision Statution of Sections 617,0502 and 617,1502, Perdia Statution MIAMI FL 33156 3. Street Address (P.O. Box Number is Not Acceptable) 1. Provision Statution of Sections 617,0502 and 617,1502, Perdia Statution MIAMI FL 33156 3. Street Address (P.O. Box Number is Not Acceptable) 1. Provision Statution of Sections 617,0502 and 617,1502, Perdia Statution MIAMI FL 33156 3. Street Address (P.O. Box Number is Not Acceptable) 3. Street Address (P.O. Box Number is Not Acceptable) 4. City	3		28			1		
S. Name and Address of Current Registered Agent DULBERG, ROBERT A ESO 100 S.E. 2ND STREET INTERNATIONAL PLAZA SUITE 2100 MAMIF IL 33156 84 City FL 85 Zip Code 86 City FL 87 Zip Code 87 Zip Code 88 A City FL 88 Zip Code 88 A City FL 88 Zip Code 89 Zip Code 80 Zi		· · ·	· · · · · · · · · · · · · · · · · · ·	 	try			. 199.032,
DULBERG, ROBERT A ESQ 100 S.E. 2ND STREET INTERNATIONAL PLAZA SUITE 2100 MIAMIF L. 33156 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florada Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florada. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florada. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florada. Such change was authorized by the corporation's board of directors. I hereby ecospit the appointment are registered agent, or both, in the State of Florada. Such change was authorized by the corporation's board of directors. I hereby ecospit the appointment are registered agent, or board of or rich rane or registered agent. I have a cooper the appointment are registered agent. I have a cooper the appoi		9. Name and Address of Curren	t Registered Agent					
100 S.E. 2ND STREET INTERNATIONAL PLAZA SUITE 2100 MIAMIF IL 33156 83 84 City FL 85 Zip Code City FL 85 Zip Code City FL 86 Zip Code City FL 87 Zip Code City FL 88 Zip Code				8	Name			Henri
INTERNATIONAL PLAZA SUITE 2100 MAMI FL 33156 84	Dulberg, Robert a ESQ			ξ	32 Street Addr	ess (P.O. Box Number is Not Acceptable	9)	
MIAMIF L 33156 ### City ### C				ļ.,				
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I standard with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the provisions of Sections 617.0503, Florida Statutes. Signature, but the prov				18	13			
11. Pursuant to the provisions of Sections 617.0502 and 617.1509. Poinda Statutes, the above-named corporation submits this statement for the purpose of changing its registered provisions of forcing such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I such change of majorities agent and 18th Augustions of Section 617.0503, Florida Statutes. 12.	MIAMI FL 33156				4 City		E1 85 Zi	ip Code
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Delignment Del	Or Legister	ed agent, or both, in the state of Fiorid	ia. Such change was autrion	zea by the co	rporation's boar	d of directors. I hereby accept the appoint	ntment as registered	d agent. I am
12.								
DELETE	·				gent signature required			
MARGULIS, STEPHEN 12 NAME 10747 NW 26TH ST SUNRISE, FL 00000 14 DIY-51-ZIP DULBERG, ROBERT 100 S.E. 2ND STREET, SUITE 2100 23 STREET ADDRESS DIY-51-ZIP MIAMI FL TSD ALLEN, ED 6740 S.W. 75TH TERR. MIAMI, FL 00000 DELETE 41 TILE VD CASBARRO, JOHN 851REL ADDRESS MIAMI, FL 00000 DELETE 41 TILE CASBARRO, JOHN 42 NAME 851REL ADDRESS BS41 N.W. 12TH ST. 23 STREET ADDRESS BS41 N.W. 12TH ST. 43 STREET ADDRESS BS41 N.W. 12TH ST. 24 CITY-51-ZIP MILE PD DELETE 41 TILE CASBARRO, JOHN 42 NAME 851REL ADDRESS BS41 N.W. 12TH ST. 43 STREET ADDRESS BS41 N.W. 12TH ST. 44 CITY-51-ZIP MILE PD DELETE 51 TITLE Change Add ACTIY-51-ZIP MILE PD DELETE 51 TITLE DC Change Add ACTIY-51-ZIP DELETE 51 STREET ADDRESS BS41 N.W. 75TH TERR. 53 STREET ADDRESS BS41 N.W. 12TH ST. CHANGE SCHULTZ, MIMI 52 NAME SCHULTZ, MIMI 52 NAME SCHULTZ, MIMI F440 S.W. 75TH TERR. 53 STREET ADDRESS MIAMI, FL 00000 DELETE 51 TITLE D Change Add CASBARRO CHANGE CHANGE ACTIY-51-ZIP DELETE D CHANGE ACTIY-51-ZIP CHANGE CHANGE ACTIY-51-ZIP CHANGE AND CHANGE ACTIY-51-ZIP ACTIY-51-ZIP CHANGE ACTIY-51-ZIP ACTIY-51-ZIP ACTIY-51-ZIP CHANGE ACTIY-51-ZIP						ADDITIONS/CHANGES TO OFFIC		
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SCHULTZ, MIMI								
5.7 STREET ADDRESS 6740 S.W. 75TH TERR. 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP MIAMI, FL 00000 5.4 CITY-ST-ZIP D		· •	∐DELETE	•			Change	Addition
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THY ST-ZIP MIAMI FL 64 CITY-ST-ZIP	CITY - \$T - ZIP	MIAMI FL		6.4 CHY	-ST-ZIP			
4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(K). Florida Statutes, I furth 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 un cath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chanter 617. Florida Statutes, and that my part	ceruly that	the information moscated on this annua	ii report or supplemental ani	iuai report is t	rue and accurat	ie and that my signature shall have the sc	ama lanal affa∧t ac if	fmede under l

oath; that I am an officer or director of the corporation of the receiver or trustee empowered appears in Block 12 or Block 12 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96 305/284-8800 Dete Desymme Phone #