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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N96000000134

1. Corporation Name
THEATRICAL ENTERPRISES OF SOUTH FLORIDA, INC.

110243-90f08-26

Principal Place of Business: 2400 NORTHWEST BOCA RATON BOULEVARD, BOCA RATON FL 33431, US
 Mailing Address: 2400 NORTHWEST BOCA RATON BOULEVARD, BOCA RATON FL 33431, US



21	2. Principal Place of Business	2a	2a. Mailing Address	3	3. Date Incorporated or Qualified
	Suite, Apt. #, etc.		Suite, Apt. #, etc.	4	4. FEI Number
22	City & State	27	City & State		Applied For
23	Zip	28	Zip		Not Applicable
24	Country	29	Country	5	5. Certificate of Status Desired
		30			6. Election Campaign Financing

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

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 office or 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 am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALTNER, ROBERT	1.2 NAME	Robert Altner
STREET ADDRESS	17552 FIELDBROOK CIRCLE	1.3 STREET ADDRESS	(Same)
CITY-ST-ZIP	BOCA RATON FL 33496	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUBIN, LEON	2.2 NAME	Leon Rubin
STREET ADDRESS	21550 CAVENDISH ROAD	2.3 STREET ADDRESS	5096-4 Heather Hill Lane
CITY-ST-ZIP	BOCA RATON FL 33433	2.4 CITY-ST-ZIP	BOCA RATON, FL 33486
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LEVENSTEIN, RICHARD	3.2 NAME	SUSAN MURRAY
STREET ADDRESS	2400 NW 2ND AVE., #14	3.3 STREET ADDRESS	2020 NE 27 CT
CITY-ST-ZIP	BOCA RATON FL 33431	3.4 CITY-ST-ZIP	LIGHTHOUSE POINT, FL 33064
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAWLOR, DEBBIE	4.2 NAME	Evelyn Adams
STREET ADDRESS	1321 S.W. 18TH ST	4.3 STREET ADDRESS	The Hamlet Country Club FL
CITY-ST-ZIP	BOCA RATON FL 33486	4.4 CITY-ST-ZIP	3600 HAMLET DR. Delray Bch, 33445
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCORMICK, BRAD	5.2 NAME	John Scannell
STREET ADDRESS	2400 NW 2ND AVE., #14	5.3 STREET ADDRESS	Boca Raton Chamber of Commerce
CITY-ST-ZIP	BOCA RATON FL 33431	5.4 CITY-ST-ZIP	1800 N. DIXIE Hwy. Boca Raton, FL 33432
TITLE	ED	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIBERTY, ANITA	6.2 NAME	Debbie Lawlor
STREET ADDRESS	2101 NE 4 CT	6.3 STREET ADDRESS	(Same)
CITY-ST-ZIP	BOCA RATON FL 33431	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anita Liberty 1/15/99 (561) 394-0206
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)