

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**Nov 16, 2008**  
**Secretary of State**

DOCUMENT# P06000031101

Entity Name: MOVIE B MIAMI, INC.

**Current Principal Place of Business:**

1110 15TH STREET  
MIAMI, FL 33139

**New Principal Place of Business:**

635 EUCLID AVE. #103  
MIAMI, FL 33139

**Current Mailing Address:**

1110 15TH STREET  
MIAMI, FL 33139

**New Mailing Address:**

635 EUCLID AVE. #103  
MIAMI, FL 33139

FEI Number: 20-4403268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REMER & GEORGES-PIERRE, P.A.  
100 NORTH BISCAYNE BOULEVARD  
1003  
MIAMI, FL 33132 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: KR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete  
Name: DOLLE, AARON P  
Address: 921 JEFFERSON AVENUE # 2D  
City-St-Zip: MIAMI BEACH, FL 33139

Title: P ( ) Delete  
Name: RAY, KENNETH A  
Address: 635 EUCLID AVENUE # 103  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: DOLLE, AARON P  
Address: 921 JEFFERSON AVENUE # 2D  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete  
Name: RAY, KENNETH A  
Address: 635 EUCLID AVENUE # 103  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH RAY

P

11/16/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date