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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000011388

1. Corporation Name

MUVICO THEATERS, INC.

Principal Place of Business	Mailing Address				
3101 NORTH FEDERAL HIGHWAY, SIXTH FLOOR FORT LAUDERDALE FL 33306	3101 NORTH FEDERAL HIGHWAY, SIXTH FLOOR FORT LAUDERDALE FL 33306				
	a Mailing Address				

FILED Mar 17, 1999 8:00 am Secretary of State

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Principal Place	e of Business	Mailing Address				-	141 8 81 91 1	1881 [884 [1	1401 (0101 1011 1001
3101 NORTH FEDERAL HIGHWAY, SIXTH FLOOR S101 NORTH FEDERAL HIGHWAY, SIXTH FLOOR FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 33306		хтн і	FLOOR	DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed 02/06/1996			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				65-0637934			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired]	,	5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution]		0 May Be d to Fees
Zıp	Country	Zip	Country			8. This corporation owes the current	year Inta	_	V
24	25	29	30			Personal Property Tax.		∐ Yes	No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Regi	stered A	Agent _	
MEL	ANI MICHAEL W			81	Name				!
MELVIN, MICHAEL W 3101 N. FEDERAL HIGHWAY., STE 602			82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
FOR	r Lauderdale FL 33306			83					
				84	City			85 Zi	p Code
					ŕ	ration submits this statement for the pur	FL		
agent. I ar SIGNATURE	m familiar with, and accept the obligation of familiar with, and accept the obligation of familiar with agents of the state of the obligation of familiar with a second or printed name of registered agents.	ations of, Section 607.0505, Flo	orida Statu	tes	agnature required		DATE		
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AN	D DIREC	TORS IN 12
TITLE	PD	☐ DELETÉ	1 1 TITI	.E				Chang	ge Addition
NAME	HASHEMI, HAMID A		1 2 NA	ИΕ					
STREET ADDRESS	DRESS 3101 N. FEDERAL HIGHWAY., SIXTH FLOOR		13 STF	13 STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		1.4 CIT	Y-ST-2	ZIP				
TITLE	VPD DELETE 21TI		2 1 1111	Ε.	1			☐ Chang	ge
NAME	MELVIN, MICHAEL W		2 2 NA/	2.2 NAME					
STREET ADDRESS	3101 N. FEDERAL HIGHWAY., STE 602		23 STF	REET A	DDRESS	s			
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		2 4 CI		ZIP			Chang	e Addition
TITLE		☐ DELETE	3 1 TITI	31 TITLE				Chang	je [] Addition ;
NAMÉ			3 2 NA	ИE					
STREET ADDRESS			33 STF	REET A	DDRES\$				
CITY-ST-ZIP			34 CIT		ZIP			Chang	ge
TITLE		☐ DELETE	4 1 TITI						ge
NAME			4 2 NA						
STREET ADDRESS					DDRESS				
CITY-ST-ZIP				ZIP			Chang	e Addition	
TITLE			5 1 TIT						
NAME					DDRESS				1
STREET ADDRESS			54 CIT						į
CITY-ST-ZIP		☐ DELETE	61 TITI		LII-	<u> </u>		Chang	e Addition
TITLE		(DECEIE	6 2 NA						
NAME					DDRESS				1
STREET ADDRESS			64 CIT						
CITY-ST-ZIP			# 0 - OII						

14. 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 sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address, with all other like empowered.

MUVICO THATES, INC.

SIGNATURE: BY:

UREAND PROPRIED NAME OF SIGNING OFFICER OF DIRECTOR

954-564-6550