## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006590

Entity Name: MIAMI THEATER CENTER INC.

**Current Principal Place of Business:** 

9806 NE 2ND AVENUE MIAMI SHORES. FL 33138

**Current Mailing Address:** 

9806 NE 2ND AVENUE MIAMI SHORES. FL 33138

FEI Number: 61-1535545 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC. 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Electronic Signature of Registered Agent

Date

**FILED** Feb 12, 2014

**Secretary of State** 

CC1722532539

Officer/Director Detail:

Title MR. Title MS

KEVIN, MILLER Name ANSIN, STEPHANIE Name

200 SOUTH BISCAYNE BLVD. Address 10 EDGEWATER DRIVE #10F Address

15TH FLOOR

City-State-Zip: CORAL GABLES FL 33133 City-State-Zip: MIAMI FL 33133

Title MR Title MRS

Name GLICKMAN, AARON Name IRIZARRY, ELAIZA

Address 19390 COLLINS AVENUE Address

12555 BISCAYNE BLVD. #907 906

City-State-Zip: SUNNY ISLES FL 33160 City-State-Zip: NORTH MIAMI FL 33181

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: ELAIZA IRIZARRY

EXECUTIVE DIRECTOR

02/12/2014

Electronic Signature of Signing Officer/Director Detail

Date