

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000000746

**Entity Name:** CITY THEATRE, INC.

**Current Principal Place of Business:**

444 BRICKELL AVE  
STE 229  
MIAMI, FL 33131

**Current Mailing Address:**

444 BRICKELL AVE  
STE 229  
MIAMI, FL 33131 US

**FEI Number:** 65-0642183

**Certificate of Status Desired:** Yes

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

FEIN, ALAN H  
150 WEST FLAGLER STREET  
SUITE 2200  
MIAMI, FL 33130 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

**Officer/Director Detail :**

Title C  
Name FEIN, ALAN  
Address 150 W. FLAGLER ST  
City-State-Zip: MIAMI FL 33131

Title S  
Name MELCHIONDO, KELLY R  
Address 150 W. FLAGLER ST  
City-State-Zip: MIAMI FL 33131

Title VP  
Name FICHMAN, MICHAEL  
Address 6050 SW 114 STREET  
City-State-Zip: KENDALL FL 33156

*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:** ALAN FEIN

**CHAIRMAN**

**01/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date