FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 1. Corporation Name 160516 (1)HAVEN OUTDOOR THEATRE, INC. Principal Place of Business Mailing Address 3155 NW 77TH AVE 4226 OLD HWY 37 LAKELAND FL 83802 MIAMI FL 33122 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 02/13/1950 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3155 NW 77+4 AVE 59-0607535 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees Ziti Country 8. This corporation owes or has paid the current year Intangible 33122 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 C T CORPORATION SYSTEM 8751 WEST BROWARD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 R4 Zip Code City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes SIGNATURE Signature, typied or printed name of regelt red aspect and tife if applicable (NO°E Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIBECTORS 12. 13. DELETE Change 1.1 TOLE TITLE resident **SPEARS JR.HAROLD T** 1.2 NAME NAME Ismael Perera 3R2E034 4226 OLD HWY 37 BUR HTT, W. M ZZIE 1.3 STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE DAMON, NANCY 2.2 NAME NAME **3155 NW 77TH AVE** STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 THILE TITLE MAS, JORGE 3.2 NAME NAME **3155 NW 77TH AVE** 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL** 34. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE VALDES, CARLOS 4 2 NAME NAME 3155 NW 77TH AVE 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 4.4 CITY-ST-ZiP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE JOHNSON, EDWIN D NAME 5.2 NAME 3155 NW 77TH AVE STREET ADDRESS **53 STREET ADDRESS** MIAMI FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

> 6.3 STREET ADDRESS 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 suppliemental annual report is true and accurate and that my signature shall have the same logal 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 in

n an address

FILED

4- 21-98 (305)599-1800