

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Secretary of State
Division of Corporations

DOCUMENT # 376909

(8)

1. Corporation Name

N.E. 2ND AVENUE THEATER CORP.

Principal Place of Business

5865 S.W. 118TH ST.
MIAMI FL 33156

Meeting Address

5865 S.W. 118TH ST.
MIAMI FL 33156



2. Principal Place of Business

21 State Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Meeting Address

26 State Apt. #, etc.
27 City & State
28 Zip
29 Country

g. Name and Address of Current Registered Agent

PELTZ, ARVIN
3250 MARY ST., #501
MIAMI FL 33133

3. Date Incorporated or Qualified

02/09/1971

3a. Date of Last Report

01/20/1995

4. FEI Number

59-1317205

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change was authorized by the corporate body, board of directors, I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.02, Florida Statutes.

SIGNATURE

12. NAME

PD
ROSE, BERNARD D
3250 MARY ST
MIAMI FL
VDS
PELTZ, J.
3250 MARY ST
MIAMI FL

[] DELETED

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[] DELETED

13. NAME

1. NAME
1. STREET ADDRESS
1. CITY, STATE, ZIP
2. NAME
2. STREET ADDRESS
2. CITY, STATE, ZIP
3. NAME
3. STREET ADDRESS
3. CITY, STATE, ZIP
4. NAME
4. STREET ADDRESS
4. CITY, STATE, ZIP
5. NAME
5. STREET ADDRESS
5. CITY, STATE, ZIP
6. NAME
6. STREET ADDRESS
6. CITY, STATE, ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change ☒ Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

[] Change [] Addition

14. I hereby certify that the information supplied with this report is true and correct and that I am a resident of the State of Florida. I further certify that the information has been filed in the correct form and report is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or both as reported in this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or added to the report with an addition.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeff

Jan Peltz

2/2/98

(325) 945-2473

CR2E034 (12/95)