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

'PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 376909 (8)

N.E. 2ND AVENUE THEATER CORP.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				t inantit feite innen nitte infre naten enn ainit n	(0(1 8181) B191 B181 B1811 (881	
5965 S.W. 118TH ST. 5865 S.W. 118TH ST. MIAMI FL 33156 MIAMI FL 33156				DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualified	· _ · ·
8 6 3 3 3 3 6	10	T 65 14-9% - 4 - 14			02/09/1971 4. FEI Number	11
	ace of Business	2a. Mailing Address				Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-1317205	\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State City & State 23 28		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Countr	Country 8. This corporation owes or has paid		
24	25	29	30			Yes No
9. Name and Address of Current Registered Agent				T	10. Name and Address of New Registere	ed Agent
PEL	.TZ, ARVIN		81	Name		
3250 MARY ST., #501 MIAMI FL 33133			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
THE STATE OF THE S	1141 1 L 33 133		83			
			84	City	<u> </u>	85 Zip Code
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, typed or proded name of registered again and har at applicable (NOTE: Registered Againt signature required when reinstating) DATE						
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME	ROSE, BERNARD D		1.2 NAME			
STREET ADDRESS	3250 MARY ST		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL 1.4		1.4 CITY-	ST-ZIP		
TITLE	155		2.1 TITLE			Change Addition
NAME	PELTZ, J.		2.2 NAME			
STREET ADDRESS	\$250 MARY ST		2.3 STREE	T ADDRESS	••	
CETY-ST-ZIP	MIAMI FL		2. 4 CITY	ST-ZIP		
TITLE	DELETE 3.11		3.1 TITLE		•	Change L Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1 ADDRESS		
CITY-ST-ZIP			3.4. CITY	ST-ZIP		
TITLE)			4.1 TITLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS			4.3 STREE	1 ADDRESS		
CITY-ST-ZIP			4.4 CITY -	ST-ZIP		
TITLE		☐ DELETE	5.1 T(TLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		I District	5.4 CITY	ST-ZIP		[] (i
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY	ST-ZIP	Casting 110 07/2V/). Floring Casting I further	

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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiper or trustee 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 on an attachment with an address.