

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766823

Entity Name: PLAYDIUM MANAGEMENT COMPANY, INC.

FILED
Jan 28, 2004
Secretary of State

Current Principal Place of Business:

% AL HINDERMAN
1100 HILLCREST DRIVE
HOLLYWOOD, FL 33021 US

Current Mailing Address:

% AL HINDERMAN
1100 HILLCREST DRIVE
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

% ALVIN FISCHER
1100 HILLCREST DRIVE
HOLLYWOOD, FL 33021 US

New Mailing Address:

% ALVIN FISCHER
1100 HILLCREST DRIVE
HOLLYWOOD, FL 33021 US

FEI Number: 59-2263251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARANO, VICTORIA
205 CORAL WAY BOX B-123
HOLLYWOOD, FL 33021

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISHER, ALVIN
Address: 4330 HILLCREST DR #514
City-St-Zip: HOLLYWOOD, FL

Title: VD () Delete
Name: ZUCKERMAN, LAWRENCE
Address: 4400 HILLCREST DRIVE APT 219
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD () Delete
Name: MCMANNE, WILLIAM
Address: 4700 WASHINGTON ST. APT. 302
City-St-Zip: HOLLYWOOD, FL 33021

Title: TD () Delete
Name: COHEN, ELI
Address: 4200 HILLCREST DR APT 403
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FISCHER, ALVIN
Address: 4330 HILLCREST DR #514
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: MCMANUS, WILLIAM
Address: 4700 WASHINGTON ST. APT. 302
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALVIN FISCHER

PD

01/28/2004

Electronic Signature of Signing Officer or Director

Date