FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F43042 (3)

1. Corporation Name
CLOUD THEATERS, INC.

Principal Place of Business	Mailing Address
% IRVING KRAHAM 1902 NEW HAVEN AVE W PALM BCH FL 33414	% IRVING KRAHAM 1902 NEW HAVEN AVE W PALM BCH FL 33414

3. Date Incorporated or Qualified: 09/02/1981
3a. Date of Last Report: 01/18/1995

2. Principal Place of Business	2a. Mailing Address
21 CLOUD THEATERS INC.	26 CLOUD THEATERS INC.
Suite, Apt. #, etc. 22 1320 SOUTHERN BLVD	Suite, Apt. #, etc. 27 1320 SOUTHERN BLVD
City & State 23 WEST PALM BEACH FL.	City & State 28 WEST PALM BEACH FL.
Zip 24 33406 Country 25 PALM BEACH	Zip 29 33406 Country 30 PALM BEACH

4. FEI Number: 59-2126679 ☐ 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. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

KRAHAM, IRVING
226 LAKE MERYL DR
W PALM BCH FL 33411

10. Name and Address of New Registered Agent

81 Name: MARK WENHAUS
82 Street Address (P.O. Box Number is Not Acceptable): 4062 LAKESPUR CIRCLE S.
83
84 City: PALM BEACH GDNS. FL 85 Zip Code: 33410

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 ✗ Mark Wenhaus — MARK WENHAUS — 2/14/96
Signature, typed or printed name of registered agent and title if applicable (Note: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☑ DELETE	1.1 TITLE	DP BETTY KRAHAM ☑ Change ☑ Addition
NAME	KRAHAM, IRVING		1.2 NAME	182 LAKE SUSAN LANE
STREET ADDRESS	226 LAKE MERYL DR		1.3 STREET ADDRESS	WPB. FL. 33411.
CITY-ST-ZIP	W PALM BCH, FL 00000		1.4 CITY-ST-ZIP	
TITLE		☐ DELETE	2.1 TITLE	DV MARLA WENHAUS ☐ Change ☑ Addition
NAME			2.2 NAME	4062 LAKESPUR CIRCLE S.
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	PALM BEACH GDNS FL. 33410
TITLE		☐ DELETE	3.1 TITLE	DS. MARK WENHAUS. ☐ Change ☑ Addition
NAME			3.2 NAME	4062 LAKESPUR CIRCLES.
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	PALM BEACH GDNS. FL. 33410
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ✓ Mark Wenhaus — 2/14/96 — 407-626-8653
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
MARK WENHAUS

CR2E034 (12/95)