FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K07757 (3)

1. Corporation Name
THUNDERBIRD SEVEN SCREEN DRIVE-IN THEATRE, INC.

Principal Place of Business
% HAROLD TURBYFILL
1000 STATE RD 7
MARGATE FL 33063

Mailing Address
% HAROLD TURBYFILL
1000 STATE RD 7
MARGATE FL 33063

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 3201 W. Sunrise Blvd.	2a. Mailing Address: 26 3501 W. Sunrise Blvd.
Suite, Apt #, etc: 22	Suite, Apt #, etc: 27
City & State: 23 Ft. Lauderdale, FL	City & State: 28 Ft. Lauderdale, FL
Zip: 24 33311 — Country: 25 USA	Zip: 29 33311 — Country: 30 USA

3. Date Incorporated or Qualified: 12/17/1987
3a. Date of Last Report: 02/21/1994
4. FEI Number: 65-0029038 ☐ 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

TURBYFILL, HAROLD
1000 STATE RD 7
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name: Shrylee D. Skorup
82 Street Address (P.O. Box Number is Not Acceptable): 2000 N. State Road 7
83 Concession Annex #2
84 City: Margate, FL 85 Zip Code: 33063

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 607.1505, Florida Statutes.

SIGNATURE: Shyrlee D. Skorup — Shyrlee D. Skorup — 4/26/95
(signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	TURBYFILL, HAROLD
STREET ADDRESS	2916 NE 23 AVE
CITY ST ZIP	LIGHTHOUSE PT FL
TITLE	D
NAME	TURBYFILL, NETTIE
STREET ADDRESS	2916 NE 23RD AVE.
CITY ST ZIP	LIGHTHOUSE PT. FL
TITLE	D
NAME	HENN, BETTY
STREET ADDRESS	1000 N. STATE RD. 7
CITY ST ZIP	MARGATE FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	☒ Change ☐ Addition
1.2 NAME	Betty Henn	
1.3 STREET ADDRESS	2000 N. State Road 7	
1.4 CITY ST ZIP	Margate, FL 33063	
2.1 TITLE	V/D	☒ Change ☐ Addition
2.2 NAME	Lori N. Parrish	
2.3 STREET ADDRESS	2000 N. State Road 7	
2.4 CITY ST ZIP	Margate, FL 33063	
3.1 TITLE	S/T/D	☒ Change ☐ Addition
3.2 NAME	Preston Henn	
3.3 STREET ADDRESS	2000 N. State Road 7	
3.4 CITY ST ZIP	Margate, FL 33063	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY ST ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY ST ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(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 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: Lori Parrish — LORI PARRISH V.P. — 4/26/95 — (305) 791-7927
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0106066 CP