

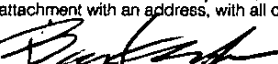


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # L33412 1. Entity Name TWENTY-FIRST CENTURY CINEMAS, INC.			
Principal Place of Business 5600 NW 32ND AV MIAMI, FL 33176 US		Mailing Address 5600 NW 32ND AV MIAMI, FL 33176 US	
DO NOT WRITE IN THIS SPACE			
		01112007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0721013	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PASTERNAK, MARSHALL R. 2060 FIRST UNION FINANCE CAUTION SUITE 2100 MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000589571 01/18/07-80021-015 150.00
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KRAMS, STEVEN 5600 NW 32ND AVE MIAMI, FL 33142		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V REUSCH, DARA 5600 NW 32ND AVE MIAMI, FL 33142		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST KRAMS, MINNA 5600 SW 32ND AVE MIAMI, FL 33142		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  DAVID KRAMS 1-11-07 305-614-4130		Date: _____ Daytime Phone #: _____	