2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2005
Secretary of State

DOCUMENT# N02000001991

Entity Name: CINEMA VORTEX FOUNDATION, INC.

Current Principal Place of Business:

445 NE 74 ST
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

445 NE 74 ST
MIAMI, FL 33138

New Mailing Address:

FEI Number: 20-0425676 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHERER, BARRON
445 NE 74 ST
MIAMI, FL 33138 US

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: D ( ) Delete
Name: SHERER, BARRON
Address: 445 NE 74 ST
City-St-Zip: MIAMI, FL 33138

Title: D (X) Delete
Name: KLAINBAUM, ABEL
Address: 329 JEFFERSON AVE #5
City-St-Zip: MIAMI BEACH, FL 33139

Title: D ( ) Delete
Name: KRAMER, LOU E
Address: 5310 NW 93 AVE
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete
Name: CHALLENGER, JOHN
Address: 595 NW 91 STREET
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: CHAUNCEY, DONALD E
Address: 6701 SW 64 COURT
City-St-Zip: S MIAMI, FL 33143

Title: D ( ) Delete
Name: WYNN, KEVIN
Address: 1100 W AVE
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: BARRON SHERER D 05/01/2005

Electronic Signature of Signing Officer or Director — Date