## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000008483

Entity Name: MIAMI GLOBO THEATER CO.

FILED Feb 14, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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120 S.W. 24TH RD MIAMI, FL 33129

Current Mailing Address: New Mailing Address:

120 S.W. 24TH RD 120 S.W. 24TH RD MIAMI, FL 33129 US

FEI Number: 61-1436555 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: Name and Address of New Registered Agent:

CHACON, DAVID CHACON, DAVID DP
1036 SOUTHWEST 8TH ST.
MIAMI, FL 33130 US 1036 SOUTHWEST 8TH ST.
MIAMI, FL 33130 US

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: DAVID CHACON 02/14/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 CHACON, DAVID
 Name:

 Address:
 1655 ASHTON CT
 Address:

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HILL, AARON
 Name:

 Address:
 120 SW 24TH RD
 Address:

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:

Title: DTS ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 TODD, ELISA
 Name:
 TODD, ELISA CEO

 Address:
 10315 NW 9 ST. CIRC. #505
 Address:
 10315 NW 9 ST. CIRC. #505

City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ELISA, TODD CFO 02/14/2008