2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2009
Secretary of State

DOCUMENT# N02000009895

Entity Name: MAD CAT THEATRE COMPANY, INC.

Current Principal Place of Business:

600 NE 34 ST
APT 1
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

600 NE 34 ST
APT 1
MIAMI, FL 33137

New Mailing Address:

FEI Number: 81-0587884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TEI, PAUL
600 NE 34 ST
APT 1
MIAMI, FL 33137 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: P ( ) Delete
Name: TEI, PAUL
Address: 600 NE 34 ST., APT 1
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete
Name: SCULLY, ANN
Address: 6912 ALMANSA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: VP ( ) Delete
Name: KIMBLE, JOSEPH
Address: 325 N. 14TH AVE
City-St-Zip: HOLLYWOOD, FL 33020

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change ( ) Addition
Name: SCULLY, ANN K
Address: 6912 ALMANSA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: VPD (X) Change ( ) Addition
Name: KIMBLE, JOSEPH
Address: 1830 RADIUS DRIVE, #1415
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Change (X) Addition
Name: BIENKIEVITZE, DANIELLE
Address: 6960 NW 23RD STREET
City-St-Zip: MARGATE, FL 33063

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: ANN K SCULLY DST 03/06/2009

Electronic Signature of Signing Officer or Director — Date