N0300000 9472

(Re	equestor's Name)
(Δα	Idress)	
(//	iui ess)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	le #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
·		
	Office Use On	ly



000023777370

10/20/03--01047--004 **78.75

03°0CT 31 PM 4: 24

NO3-30)

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: DRE	EAMSCREEN			
. Enclosed is an original a	(PROPOSED CORPORATI			
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate PY REQUIRED	
FROM:		ited or typed)		
Bo an RATON FL 33498 City, State & Zip				
City, State & Zip 561-929-1007				

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 22, 2003

EMILIE HANNOUN 1119 BLUE CORAL DR. BOCA RATON, FL 33498

SUBJECT: DREAM SCREENS INC.

Ref. Number: W03000030761

We have received your document for DREAM SCREENS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2004 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6878.

Letter Number: 903A00057660

Alan Crum Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

· ARTICLES OF INCORPORATION	
In Compliance with Chapter 617, F.S., (Not for Profit)	
ARTICLE I NAME	
The name of the corporation shall be: —DREAM SCREENS INC. MAGIC SCREENS. INC.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
11119 BLUE CORAL DRIVE	
BOCA RATON, FL 33498	-
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
TO PERMIT HOSPITALIZED CHILDREN TO HAVE ACCESS TO CUBRENT	
MOVIES SCREENINGS IN THE HOSPITALS.	
ARTICLE IV MANNER OF ELECTION	
The manner in which the directors are elected or appointed:	
PRESIDENT WILL CHOOSE BOARD MEMBERS. PRESIDENT IS CREATOR	
AND AGENT OF NON_PROFIT CORPORATION.	
ADMICE DE L'INTERES DE L'ANDICE DE L'ANDIC	
ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):	
EMILIE HANNOUN PRESIDENT 11119 blue coral dr Boca Raton, FL	3349
A pline grunwald -vice- president - 11119 blue coral drive	
ው ሲያለ ከመመል ነው	
3920 EAST BLVD	
LA 90066 CA.	
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the registered agent is:	
EMILIE HANNOUN - 11119 Blue Coral Drive Boca Raton, F1 33498	
ADMICE THE THEODROP A TOP	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	

Emilie Hannoun, 11119 Blue Coral Drive Eoca Raton, FL 33498

 $\frac{09-15-03}{09-15-03}$

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Signature/Incorporator