

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002535

FILED
May 01, 2006
Secretary of State

Entity Name: HISTORIC ENTERTAINMENT, INC.

Current Principal Place of Business:

9700 SOUTH DIXIE HIGHWAY, SUITE 1030
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

9700 SOUTH DIXIE HIGHWAY, SUITE 1030
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-0911721 **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:

SAMOLE, MYRON M
9700 SOUTH DIXIE HIGHWAY, SUITE 1030
MIAMI, FL 33156 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KESSLER, ELISE
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: VD () Delete
Name: ROSAS-GUYON, LOUIS
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: STD () Delete
Name: LANNERS, JAMES J
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: ROSAS-GUYON, WENDY
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: LANNERS, PATRICIA M
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: SAMOLE, MYRON M ESQ.
Address: 9700 SOUTH DIXIE HIGHWAY, SUITE 1030
City-St-Zip: MIAMI, FL 33156

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 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: LOUIS ROSAS-GUYON

VD

05/01/2006

Electronic Signature of Signing Officer or Director

Date