2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000001431

FILED Feb 08, 2010 Secretary of State

Entity Name: DREAM THEATRE PRODUCTIONS, INC.

Current Principal Place of Business: New Principal Place of Business:

515 VALENCIA AVENUE, #7 3634 PONCE DE LEON BLVD CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

515 VALENCIA AVENUE, #7 P.O.BOX 143746

CORAL GABLES, FL 33134 CORAL GABLES, FL 33114

FEI Number: 56-2641901 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

CARDENAS, ALISON V
515 VALENCIA AVENUE, #7
CORAL GABLES, FL 33134 US

CARDENAS, ALISON V
3634 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 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: ALISON V.CARDENAS 02/08/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: CARDENAS, CARLOS F
Address: 3634 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: CARDENAS, ALISON V
Address: 3634 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: D

Name: COLEMAN, DR. HENRY L

Address: 11130 SW 88TH STREET, SUITE 100

City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: ALISON V. CARDENAS D 02/08/2010