

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18713 (0)

1. Corporation Name

THE BRIDGE THEATER, INC.



Principal Place of Business

2100 WASHINGTON AVE
MIAMI BEACH FL 33139
US

Mailing Address

P.O. BOX 38-1778
MIAMI FL 33238-1778

3. Date Incorporated or Qualified
01/13/1987

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2766173

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEEL, JULIAN D.
752 86TH ST
MIAMI BCH FL 33141

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME STEEL, J. D.
STREET ADDRESS 752 86TH ST
CITY - ST - ZIP MIAMI BCH FL ☐ DELETE

TITLE VD
NAME LASKY, HARVEY
STREET ADDRESS 9700 S DIXIE HWY #500
CITY - ST - ZIP MIAMI FL ☒ DELETE

TITLE SD
NAME DIEZ, MANNY
STREET ADDRESS 1777 VENICE LN #133
CITY - ST - ZIP N MIAMI FL ☒ DELETE

TITLE TD
NAME GUTIERREZ, BETTY
STREET ADDRESS 344 MERIDIAN AVE
CITY - ST - ZIP MIAMI BEACH FL ☒ DELETE

TITLE TREASURER
NAME MARIA GARCIA MEDINA
STREET ADDRESS 2210 COLLINS AVE #1506
CITY - ST - ZIP MIAMI BEACH, FL 33139 ☐ DELETE

TITLE SECRETARY
NAME STEVE WISE
STREET ADDRESS 2425 SW 27th AVE. #6
CITY - ST - ZIP MIAMI, FL 33145 ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

FD
MARIA GARCIA Medina ☒ Change ☐ Addition
2210 COLLINS AVE. #1506
MIAMI BEACH, FL 33139

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

VD
PETER ROTH ☒ Change ☐ Addition
8300 NW 53rd ST
SUITE 401
MIAMI, FL 33166

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

SD
STEVE WISE ☒ Change ☐ Addition
2425 S.W. 27th AVE. #6
MIAMI, FL 33145

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1, 96

Daytime Phone #

CR2E037 (12/95)