

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 21, 2001 8:00 am**  
**Secretary of State**

06-21-2001 90004 014 \*\*\*\*61.25

**DOCUMENT # N18713**

1. Entity Name

**THE BRIDGE THEATER, INC.**

Principal Place of Business

Mailing Address

555 -17 ST  
 MIAMI BEACH FL 33139  
 US

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

2. Principal Place of Business

3. Mailing Address

752 86th Street  
 Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Beach, Florida

City & State

Zip

33141

Country

U.S.A.

Zip

Country

4. FEI Number

59-2766173

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

8. 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

*Julian D. Steel*

Julian D. Steel - President

April 30th, 2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
 FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE TD  
 NAME SPAULDING, BRIAN D  
 STREET ADDRESS 1900 SUNSET HARBOR DR STE 812  
 CITY-ST-ZIP MIAMI BEACH FL 33139 ☐ Delete

TITLE VD  
 NAME ROTH, PETER  
 STREET ADDRESS 8300 NW 53RD STREET #401  
 CITY-ST-ZIP MIAMI FL ☐ Delete

TITLE S  
 NAME MISTRIL, MARTHA  
 STREET ADDRESS 9271 S.W. 76TH ST. C/O C.S.A. MARKETING  
 CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE Director  
 NAME Jose Fernandez  
 STREET ADDRESS 475 S.W. 8th Street  
 CITY-ST-ZIP Miami, Fl. 33130 ☐ Delete

TITLE Director  
 NAME Alvaro Fernandez  
 STREET ADDRESS 2555 Collins Avenue  
 CITY-ST-ZIP Penthouse 210 33140 ☐ Delete

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Julian D. Steel*

Julian D. Steel April 30th 2001

(305) 886-3908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)