2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000002205

FILED Feb 04, 2008 Secretary of State

Entity Name: THE PEMBROKE PINES THEATRE OF THE PERFORMING ARTS, INC.

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

12233 SW 55TH STREET 12399 SW 53RD STREET

SUITE 807 SUITE 102

COOPER CITY, FL 33330 US COOPER CITY, FL 33330 US

Current Mailing Address: New Mailing Address:

12233 SW 55TH STREET 12399 SW 53RD STREET

SUITE 807 SUITE 102

COOPER CITY, FL 33330 US COOPER CITY, FL 33330 US

FEI Number: 65-0431190 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:

FERREL, JOSEPH C KRAMER, KEITH G 12106 SW 2 STREET KRAMER, KEITH G 18459 NW 9TH STREET

PEMBROKE PINES, FL 33025 US PEMBROKE PINES, FL 33029 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: KEITH G. KRAMER 02/04/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

Name: CICHEWICZ, JAMES A. Name: KRAMER, KEITH G
Address: 18099 92 LANE NORTH Address: 18459 NW 9TH STREET

City-St-Zip: LOXAHATCHEE, FL 33470 US City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: DC () Delete Title: () Change () Addition

 Name:
 ENTIN, ALVIN
 Name:

 Address:
 6002 DOGWOOD CIR
 Address:

 City-St-Zip:
 TAMARAC, FL 33319 US
 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 FERREL, JOSEPH C
 Name:

 Address:
 12106 SW 2 STREET
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33025 US
 City-St-Zip:

Title: DV (X) Delete Title: () Change () Addition

 Name:
 KRAMER, KEITH G
 Name:

 Address:
 18459 NW 9 STREET
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33029 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KEITH G. KRAMER DP 02/04/2008