

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 23, 1999 8:00 am  
Secretary of State

02-23-1999 90014 007 \*\*\*\*61.25

0022697

DOCUMENT # N94000001300

1. Corporation Name

CLASSIC/FOREIGN FILM DISCUSSION GROUP, INC.

Principal Place of Business

330 SE 2 ST  
#403G  
HALLANDALE FL 33009

Mailing Address

330 SE 2 ST  
#403G  
HALLANDALE FL 33009



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

03/03/1994

4. FEI Number

65-0486874

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

9. Name and Address of Current Registered Agent

REININGER, EDWARD J DR.  
330 SE 2 ST  
#403G  
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CD  
REININGER, EDWARD DR.  
330 S.E 2 ST.  
HALLANDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SEQUENZIA, SEBASTIAN S.  
4124 SW 22 ST.  
FT. LAUDERDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
KATZIF, CHARLOTTE  
18041 BISCAYNE BLVD. #704 T4 SO.  
NORTH MIAMI BEACH FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DEMOS, MARIAN DR.  
3001 S OCEAN DRIVE  
HOLLYWOOD FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DEANER, LU  
3025 N.E. 22ND ST.  
FORT LAUDERDALE FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FRANKLIN, PHYLLIS  
3129 OAKLAND SHORES DR  
FT LAUDERDALE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
D  
KATZIF, CHARLOTTE  
18041 BISCAYNE BLVD #704 T4 SO.  
NORTH MIAMI BEACH FL

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
D  
DEMOS, MARIAN DR.  
3001 S OCEAN DRIVE  
HOLLYWOOD FL

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/99 954-458-5825

CR2E037 (11/98)