## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** May 09, 2005 08:00 AM DOCUMENT.# N9400001300 **Secretary of State** CLASSIC/FOREIGN FILM DISCUSSION GROUP, INC. Principal Place of Business Mailing Address 330 SE 2 ST 330 SE 2 ST #403G #403G HALLANDALE, FL 33009 HALLANDALE, FL 33009 04022005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0486874 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent REININGER, EDWARD J DR DO NOT WRITE 330 SE 2 ST #403G IN THIS SPACE HALLANDALE, FL 33009 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. I am familiar with, and accept the obligations of registered agent. 8 Sword anine (NOTE. Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and the if applicable 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Due by May 1, 2005 10. OFFICERS AND DIRECTORS TITLE CD REININGER, EDWARD DR. STREET ADDRESS 330 S.E 2 ST. CITY-ST-ZIP HALLANDALE, FL U00000364812 TITLE 05/09/05-80010-024 81.25 NAME SEQUENZIA, SEBASTIAN S. STREET ADDRESS 4124 SW 22 ST. CATY-ST-ZIP FT. LAUDERDALE, FL TITLE NAME DEMOS, MARIAN DR STREET ADDRESS 3001 S OCEAN DRIVE DO NOT WRITE CITY-ST-ZIP HOLLYWOOD, FL TITLE IN THIS SPACE MARKE DEANER, LU STREET ADDRESS 3025 N.E. 22ND ST. CITY-ST-ZIP FORT LAUDERDALE, FL TITLE D RAME RABIN, EVVY STREET ADDRESS 8020 NW 44TH CT CITY-ST-ZIP LAUDERHILL, FL 33351 TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

NAME

CITY-ST-ZIP

GAUTHIER, BRIAN

HOLLYWOOD, FL

STREET ADDRESS | 1317 ADAMS STREET

SIGNATURE: Dr Edward Revivous	April 10, 2005	954-458-5825
SIGNATURE AND TYPED OR PROTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #