2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# N94000002537

Entity Name: CHILDREN'S MUSICAL THEATRE, INC.

Current Principal Place of Business:

900 NE 12TH AVENUE
SUITE 301
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

700 NE 14TH AVENUE
SUITE 406
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 65-0547492 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FUKS, LYUNDMILA
700 NE 14TH AVENUE
SUITE 406
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FUKS, LYUDMILA
Address: 700 N.E. 14TH AVE., #406
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: TD ( ) Delete
Name: IVANOVA, IRINA
Address: 1461 NE 169 STREET APT. 318
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: SD ( ) Delete
Name: ALEXANDER, OLEG
Address: 821 NE 7TH STREET
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VP ( ) Delete
Name: MILMAN, ANDREY
Address: 1461 NE 169 STREET APT. 318
City-St-Zip: NORTH MIAMI BEACH, FL 33020

Title: VP ( ) Delete
Name: YEREMEYEVA, MARINA
Address: 821 NE 7TH STREET
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: IVANOVA, IRINA
Address: 1801 S. OCEAN DR. APT.439
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: MILMAN, ANDREY
Address: 1801 S. OCEAN DR. APT 439
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: ( ) Change ( ) Addition
Name:
Address:
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: MILMAN ANDREY VP 02/12/2009

Electronic Signature of Signing Officer or Director — Date