

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002537

FILED  
Feb 22, 2010  
Secretary of State

**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  
Name: FUKS, LYUDMILA  
Address: 700 N.E. 14TH AVE., #406  
City-St-Zip: HALLANDALE BEACH, FL 33009

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: FUKS LYUDMILA

PD

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date