

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000002123

1. Entity Name

THE HOLLYWOOD BOULEVARD THEATRE, INC.

Principal Place of Business

1938 HOLLYWOOD BLVD
HOLLYWOOD FL 33020

Mailing Address

1938 HOLLYWOOD BLVD
HOLLYWOOD FL 33020

2. Principal Place of Business

1720 HARRISON ST. #14D
HOLLYWOOD, FL.

3. Mailing Address

1720 HARRISON ST
HOLLYWOOD, FL.

Suite, Apt. #, etc.

14 D

Suite, Apt. #, etc.

14 D

City & State

HOLLYWOOD, FL.

City & State

HOLLYWOOD, FL

Zip

33020

Country

BRWARD

Zip

33020

Country

BRWARD

4. FEI Number

65-0577816

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WAXMAN, JERRY
1938 HOLLYWOOD BLVD
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1720 HARRISON ST. #14D

City

HOLLYWOOD

FL

Zip Code

33020

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9/12/01

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WAXMAN, JERRY 1938 HOLLYWOOD BLVD HOLLYWOOD FL 33020	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MDVP SIMMONS, ELLEN 5321 GATE LAKE RD FT. LAUDERDALE FL 333	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DANNENBAUM, ELEANOR 331 RIVER BRANCH CIRCLE ELKINS PARK PA 19027	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM DALTON, DON 97 JUNIPER RD HOLLYWOOD FL 33021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DM GOTTLIEB, KENNETH 125 N 46TH AVE HOLLYWOOD FL 33021	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	800004621158--9 -10/03/01--01021--019 *****70.00 *****70.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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.

SIGNATURE:

SIGNATURE REQUIRED

9/12/01

954 929-0111

CR2E037 (5/01)