

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000000134

**FILED**  
**Apr 30, 2004**  
**Secretary of State****Entity Name:** THEATRICAL ENTERPRISES OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**154 NW 16 ST  
BOCA RATON, FL 33432 US**New Principal Place of Business:****Current Mailing Address:**154 NW 16 ST  
BOCA RATON, FL 33432 US**New Mailing Address:****FEI Number:** 65-0639483**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WALTER H MESSICK ATTORNEY AT LAW  
2101 CORPORATE BLD STE 101  
BOCA RATON, FL 33431 US**Name and Address of New Registered Agent:**WALTER H MESSICK, P.A.  
1900 CORPORATE BLD SUITE 200 EAST  
BOCA RATON, FL 33431 US

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: WALTER H. MESSICK

04/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GRANDE, FRANK  
Address: 401 E LINTON BLVD #577  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: RUBIN, LEON  
Address: 21550 CAVENDISH ROAD  
City-St-Zip: BOCA RATON, FL 33433

Title: S ( ) Delete  
Name: HARVEY, LINDA  
Address: 1099 NW 7 ST  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: SIMON, LAINIE  
Address: 5896 ST. ANNS WAY  
City-St-Zip: BOCA RATON, FL 33431

Title: T ( ) Delete  
Name: FAHNRICH, MIKE  
Address: 10887 TEA OLIVE LN  
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete  
Name: MARDER, SHERRY  
Address: 11041 BLUE CORAL DR  
City-St-Zip: BOCA RATON, FL 33498

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: S (X) Change ( ) Addition  
Name: NOVAKOFF, JAMES  
Address: 154 NW 16TH ST  
City-St-Zip: BOCA RATON, FL 33432

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

Title: T (X) Change ( ) Addition  
Name: FAHNRICH, MIKE  
Address: 10887 TEA OLIVE LN  
City-St-Zip: BOCA RATON, FL 33498

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK GRANDE

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date