2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000134

FILED May 01, 2005 Secretary of State

Entity Name: THEATRICAL ENTERPRISES OF SOUTH FLORIDA, INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
154 NW 16 BOCA RAT	3 ST TON, FL 33432 US			
Current Mailing Address:		New Maili	New Mailing Address:	
154 NW 16 BOCA RAT	S ST TON, FL 33432 US			
In accordanc	: 65-0639483			
1900 CORI	H MESSICK, P.A. PORATE BLD SUITE 200 EAST TON, FL 33431 US			
	named entity submits this statement for the purpo e of Florida.	ose of changing	its registered office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete GRANDE, FRANK 401 E LINTON BLVD #577 DELRAY BEACH, FL 33483	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete RUBIN, LEON 21550 CAVENDISH ROAD BOCA RATON, FL 33433	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GRANDE, JOAN 154 NW 16TH ST BOCA RATON, FL 33432	
Title: Name: Address: City-St-Zip:	S () Delete NOVAKOFF, JAMES 154 NW 16TH ST BOCA RATON, FL 33432	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LAMBERT, DENNIS 154 NW 16TH ST BOCA RATON, FL 33432	
Title: Name: Address: City-St-Zip:	D () Delete SIMON, LAINIE 5896 ST. ANNS WAY BOCA RATON, FL 33431	Title: Name: Address: City-St-Zip:	DS (X) Change () Addition SIMON, LAINIE 5896 ST. ANNS WAY BOCA RATON, FL 33431	
Title: Name: Address: City-St-Zip:	T () Delete FAHNDRICH, MIKE 10887 TEA OLIVE LN BOCA RATON, FL 33498	Title: Name: Address: City-St-Zip:	DT (X) Change () Addition FAHNDRICH, MIKE 10887 TEA OLIVE LN BOCA RATON, FL 33498	
Title: Name: Address: City-St-Zip:	D () Delete MARDER, SHERRY 11041 BLUE CORAL DR BOCA RATON, FL 33498	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MIKE FAHNDRICH DT 05/01/2005