

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000746

FILED
Jan 20, 2011
Secretary of State

Entity Name: CITY THEATRE, INC.

Current Principal Place of Business:

444 BRICKELL AVE
STE 229
MIAMI, FL 33131 US

New Principal Place of Business:

Current Mailing Address:

444 BRICKELL AVE
STE 229
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0642183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, STEPHANIE
1475 SANDPIPER CIRCLE
WESTON, FL 33327 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: C
Name: FEIN, ALAN
Address: 150 W. FLAGLER ST
City-St-Zip: MIAMI, FL 33131

Title: VP
Name: LEVINE, PAULA DR
Address: 3 GROVE ISLE DRIVE #205
City-St-Zip: COCONUT GROVE, FL 33133

Title: T
Name: PALPAS, SUAT
Address: 1111 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: D
Name: NORMAN, STEPHANIE
Address: 1475 SANDPIPER CIRCLE
City-St-Zip: WESTON, FL 33327

Title: S
Name: MELCHIONDO, KELLY R
Address: 150 W. FLAGLER ST
City-St-Zip: MIAMI, FL 33131

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: STEPHANIE NORMAN

D

01/20/2011

Electronic Signature of Signing Officer or Director

_____ Date