2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2005
Secretary of State

DOCUMENT# N98000005751

Entity Name: MOSAIC THEATRE, INC.

Current Principal Place of Business:

12200 WEST BROWARD BLVD.
BUIDING 3000, #3121
PLANTATION, FL 33325

New Principal Place of Business:

Current Mailing Address:

12200 WEST BROWARD BLVD.
BUILDING 3000, #3121
PLANTATION, FL 33325

New Mailing Address:

FEI Number: 65-0870575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SIMON, RICHARD JAY
8260 CLEARY BLVD #2611
PLANTATION, FL 33324 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:	ED	( ) Delete
Name:	SIMON, RICHARD J	
Address:	8260 CLEARY BLVD. #2611	
City-St-Zip:	PLANTATION, FL 33324	
Title:	D	( ) Delete
Name:	GARFINKEL, LENNY DR	
Address:	3050 N 35TH ST	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	D	( ) Delete
Name:	SMALL, JESSE	
Address:	409 W HALLANDALE BCH BLVD	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	D	( ) Delete
Name:	SIMON, SHERMAN	
Address:	9999 COLLINS AVE 20K	
City-St-Zip:	BAL HARBOR, FL 33154	
Title:	D	( ) Delete
Name:	SIMON, PAUL E DR	
Address:	9999 COLLINS AVE 20K	
City-St-Zip:	BAL HARBOR, FL 33154	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: RICHARD JAY SIMON ED 06/28/2005
Electronic Signature of Signing Officer or Director — Date