

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006061

FILED
Apr 05, 2008
Secretary of State

Entity Name: PANTHER PARENTS THEATER BOOSTERS, INC.

Current Principal Place of Business:

7460 SW 118 STREET
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

PO BOX 562271
MIAMI, FL 33156

New Mailing Address:

FEI Number: 65-0872351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GENET, ELLEN
7105 SW 115 TERR.
MIAMI, FL 33156 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: T () Delete
Name: BIRNHAK, RANDI
Address: 8950 SW 69 COURT #208
City-St-Zip: MIAMI, FL 33156

Title: P () Delete
Name: GENET, ELLEN
Address: 7105 SW 115 TERR.
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: JANISSE, PAT
Address: 12365 SW 73 AVE
City-St-Zip: MIAMI, FL 33156

Title: VP () Delete
Name: EVINS, SUE
Address: 7261 SW 151ST ST
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: BUCCIERO, PAT
Address: 6601 SW 128 STREET
City-St-Zip: MIAMI, FL 33156

Title: S () Delete
Name: EPELBAUM, GISELA
Address: 6450 SW 92ND ST
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 exemption stated in Chapter 119, 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: ELLEN GENET

PRES

04/05/2008

Electronic Signature of Signing Officer or Director

Date