2004 FOR PROFIT CORPORATIONS ANNUAL REPORT (AR)

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## May 10, 2004 8:00 am Secretary of State DOCUMENT # P03000056031 04-19-2004 90396 032 \*\*\*150.00 1. Entity Name 39TH STREET ENTERTAINMENT, INC. Principal Place of Business Mailing Address 3912 NW 36 WAY LAUDERDALE LAKES FL 33309 66420444 3912 NW 36 WAY LAUDERDALE LAKES FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State Applied For Not Applicable Country Zio Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ABRAMS, RYAN---3912 NW 36 WAY Street Address (P.O. Box Number is Not Acceptable) LAUDERDALE LAKES FL 33309 City Zip Code tement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of re SIGNATURE (NOTE: Registered Agent signature required which reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. nnέ TITLE ☐ Change Detete ■ Addition ABRAMS, RYAN NAME 3912 NW 36 WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES FL 33309 CITY-ST-ZIP ☐ Change TITLE Delete ■ Addition EDMUND, ANDRE NAME NAME STREET ADDRESS 4760 NW 10 CT STREET ADDRESS LAUDERHILL FL 33313 CITY-ST-ZIP CITY-ST-ZIP TITLE TD Detete TITLE ☐ Change ☐ Addition NAME CARTER, WALTER NAME STREET, ADDRESS STREET ADDRESS 4928 NW. 120 AVE ---CITY-ST-ZIP. CORAL SPRINGS FL 33065 CITY-ST-ZIP TITLE Delete TITLE □ Change LANDELL, ANDY NAME NAME 3700 NW 39 ST STREET ADDRESS STREET ADDRESS LAUDERDALE LAKES FL 33309 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P 12. Thereby certify that the information supplied with this filing does not qualify 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 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 trusteee inpowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corporation of the corporation of the receiver or trusteee inpowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the corpora

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