2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 25, 2007 8:00 am **Secretary of State DOCUMENT # P95000009249** 01-25-2007 90039 023 ***158.75 HOLLYWOOD FORUM, INC. Principal Place of Business Mailing Address ~ (2000. mm.) 2880 WEST OAKLAND PARK BOULEVARD 2880 WEST OAKLAND PARK BOULEVARD #120 #120 FT LAUDERDALE, FL 33311 FT LAUDERDALE, FL 33311 2. Principal Place of Business No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 01182007 CR2E034 (12/06) Cha-P City & State C'ty & State 4. FEI Number Applied For 65-0568962 Not Applicable Zin Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHMOCKER, SUSANNA Street Address (P.O. Box Number 's Not Acceptable) C/O I & S MANAGEMENT INC 2880 W. OAKLAND PARK BLVD #118 FORT LAUDERDALE, FL 33311 Civ Zio Code FL 8. The above named entity submits this statement for the ourbose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent. SIGNATURE Sgroupe transfer or airdinance tragities diagram and trait dapp capit. CIGIS Registered Agent translation required when religional 24.0 FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change De ete GELLER, DIETER 2880 W OAKLAND PARK BLVD, #120 FT LAUDERDALE, FL 33311 GELLER, ELFRIEDE NAME NAME 22440 ENSENADA WAY STREET ADORESS STREET ADDRESS CITY ST ZIP BOCA RATON, FL 33433 CITY ST ZIP TITLE ☐ De ete Addition TITLE Change | JUSTEN-GELLER, INGRID 2880 W OAKLAND PARK BLVD, #120 FT LAUDERDALE, FL 33311 STREET ADDRESS STREET ADORESS CITY ST ZIP CITY ST 7IP TITLE De ete TITLE ☐ Change Add tion NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP TITLE De ete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP TITLE ☐ De ete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP TITLE De ete Change TILE Addition KAME NAME STREET ADDRESS STREET ADDRESS CITY ST 7IP CITY ST ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report of 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 trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

DIETER GELLER, PRESIDENT 01-18-07

FILED

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR