## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT 1. Corporation Name	#	P95000042991	(6)

MOVIETIME ENTERTAINMENT, INC. Principal Place of Business Mailing Address 930 WASHINGTON AVENUE 930 WASHINGTON AVENUE FIFTH FLOOR FIFTH FLOOR MIAMI BEACH FL 33139. MIAMI BEACH FL 33139 3. Date incorporated or Qualified 3a. Date of Last Report 05/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0587236 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired  $\Box$ 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip  $Z_{\rm ID}$ Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo KRASSNER, BRAD L 82 Street Address (P.O. Box Number is Not Acceptable) 930 WASHINGTON AVENUE FIFTH FLOOR 83 MIAMI BEACH FL 33139 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and the it applicable (NOTE: Registered Agest signature required when reinstating) (12/95)12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TITLE Change , Addition KRASSNER, BRAD L NAME 1.2 NAME CR2E034 930 WASHINGTON AVENUE FIFTH FLOOR STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY - \$1 - ZIP 1.4 CITY - ST - ZIP TITLE [] DELETE 2 1 TITLE C/D Change Addition SIMON, STEVEN NAME 2.2 NAME Krassner, Brad L. 420 JEFFERSON STREET THIRD FLOOR STREET ADDRESS 2.3 STREET ADDRESS 930 Washington Avenue, Fifth Floor MIAMI BEACH FL 33139 CITY-ST-ZIP 24 CHY-ST-ZIP Miami Beach, FL 33139 TITLE DELETE 3 1 TITLE Addition Change NAME TURK, LARRY M 3.2 NAME 930 WASHINGTON AVENUE FIFTH FLOOR SIBBEL ADORESS 3.3. STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 3 4 CITY - \$1 - 7IP TITLE DELETE 4. 1 THILE Change Addition FULLERTON, MITCHELL NAME 4.2 NAME 3410 21ST COURT SE STREET ADDRESS 4.3 STREET ADDRESS **OLYMPIA WA 98501** CITY - ST - ZIP 4.4 CITY - S1 - ZIP TITLE ["] DELETE 5 1 TITLE Change ☐ Addition BENJAMIN, BRAD L NAME 5.2 NAME 3410 21ST COURT SE STREET ADDRESS 5.3 STREET ADDRESS **OLYMPIA WA 98501** CITY-ST-ZIP 5.4 CHY - \$1 - ZIP TITLE []] DELETE 6 1 THILE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 C/TY-ST-Z/P 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brad

5/17/96

305/532-1566

Daytime Phone ₱