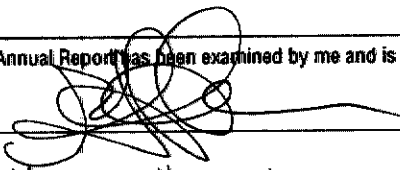


No. C 82772 Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FEE REQUIRED	Annual Report Form <i>Due No Later Than November 30, 1997</i> 1. Mailing Address - Please Correct, If Not Correct PLIT THEATRES INC. TAX DEPARTMENT 1303 YONGE STREET TORONTO ONTARIO M4T 2Y9	2. Registered Agent and Office NOT A P.O. BOX CT CORPORATION SYSTEM 300 N. 6TH ST. BOISE ID 83701 3. Organized Under the Laws of: DE C 82772																																										
4. Corporations: Enter Names and Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of <input type="checkbox"/> Managers or <input type="checkbox"/> Members (check one)																																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Office held</th> <th style="width: 20%;">Name</th> <th style="width: 30%;">Street or P.O. Address</th> <th style="width: 15%;">City</th> <th style="width: 15%;">State</th> <th style="width: 15%;">ZIP</th> </tr> </thead> <tbody> <tr> <td>PRESIDENT:</td> <td>ALLEN KARP</td> <td>1303 YONGE STREET</td> <td>TORONTO</td> <td>ONTARIO</td> <td>M4T 2Y9</td> </tr> <tr> <td>SECRETARY:</td> <td>MICHAEL HERMAN</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td>DIRECTORS:</td> <td>ALLEN KARP</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td></td> <td>ELLIS JACOB</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td></td> <td>MICHAEL HERMAN</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> <tr> <td></td> <td>ROBERT J. TOKIO</td> <td>" "</td> <td>"</td> <td>"</td> <td>"</td> </tr> </tbody> </table>			Office held	Name	Street or P.O. Address	City	State	ZIP	PRESIDENT:	ALLEN KARP	1303 YONGE STREET	TORONTO	ONTARIO	M4T 2Y9	SECRETARY:	MICHAEL HERMAN	" "	"	"	"	DIRECTORS:	ALLEN KARP	" "	"	"	"		ELLIS JACOB	" "	"	"	"		MICHAEL HERMAN	" "	"	"	"		ROBERT J. TOKIO	" "	"	"	"
Office held	Name	Street or P.O. Address	City	State	ZIP																																							
PRESIDENT:	ALLEN KARP	1303 YONGE STREET	TORONTO	ONTARIO	M4T 2Y9																																							
SECRETARY:	MICHAEL HERMAN	" "	"	"	"																																							
DIRECTORS:	ALLEN KARP	" "	"	"	"																																							
	ELLIS JACOB	" "	"	"	"																																							
	MICHAEL HERMAN	" "	"	"	"																																							
	ROBERT J. TOKIO	" "	"	"	"																																							
5. NATURE OF BUSINESS MOTION PICTURE EXHIBITION	6. I certify that this Annual Report has been examined by me and is to the best of my knowledge true, correct and complete. Signature  Date Dec. 23, 1997 Name (Typed or Printed) MICHAEL HERMAN Title EXEC. V.P. CORPORATE AFFAIRS & SECRETARY																																											

C

Fold, seal and mail this portion.

C

Detach at this perforation and discard this lower portion.

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- 1.) Please pay special attention to the mailing address. If it is incorrect, please make the appropriate corrections.
 NOTE: The name of the business entity cannot be altered on the annual report form.
- 2.) If the registered agent has changed or moved, please make that correction on this form. The registered agent must be found IN IDAHO at a PHYSICAL ADDRESS. PO Boxes WILL NOT be accepted. If report is for a Limited Liability please refer to #4 below.
- 3.) Corporation: Enter names and addresses of ONLY the president, secretary, and directors in block 4.
 Limited Liability Company: Enter the names and addresses of the managers or members in block 4.
 NOTE: Putting "same as last year" WILL NOT be accepted.
- 4.) Corporation: If the pre-filled information pertaining to the nature of business, in block 5, is incorrect please correct it. If the block says "any lawful" please enter the nature of business. Please be specific. "Nonprofit" or "General Business" is too broad.
 Limited Liability Company: If the registered agent has been changed in block 2, then the NEW registered agent must accept that position by signing in block 5.
- 5.) Block 6 must be signed by an authorized person.

If the business entity is no longer doing business in Idaho, please contact the Secretary of State's office at 208 334-2301 for further instructions.

NOTE: The annual report must be received by the Office of the Secretary of State on or before November 30 or the Business Entity will forfeit its right to do business. Postmark date will not be accepted. If a corporation does forfeit, there will be a \$20.00 fee due to reinstate. If a limited liability company does cancel there will be a \$10.00 fee due to reinstate.

DUE NO LATER THAN NOVEMBER 30