		New York					
Address of Principal Business Operations (if different from Executive Offices)	(Number	and Street, (City, State, Zip Co	de) Telephone 1	Number (Inc	luding Area (Code)
Brief Description of Business Musical stage play, entitled "Young Frank	kenstein"				220	CESSE	<u> Č:</u>
	nership, to be forme	-	other ed			27 2007	Sc
Actual or Estimated Date of Incorporation of	r Organization:	Month January	Year 2007	☒ Actual		OMSUN ANCIAL	
Jurisdiction of Incorporation or Organization	n: (Enter two-letter	U.S. Postal	Service abbreviati	on for State:			
·	CN for Canada;	FN for othe	er foreign jurisdict	DE			
Federal: Who Must File: All issuers making an offerin U.S.C. 77d(6). When To File: A notice must be filed no later the Exchange Commission (SEC) on the earlier of it is due, on the date it was mailed by United the Where To File: U.S. Securities and Exchange Copies Required: Five (5) copies of this notice photocopies of the manually signed copy or be Information Required: A new filing must continued not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on and that have adopted this form. Issuers relying have been made. If a state requires the paymer This notice shall be filed in the appropriate scenarion unless such exemption is predicated on the exemption unless such exemption is predicated on the	the date it is received its received its received or ce is Commission, 450 Fi is must be filed with the car typed or printed si ain all information reand any material changes on ULOE must file at of a fee as a precondition of a fee as a	irst sale of see by the SEC are triffied mail to fth Street, N ne SEC, one ignatures. quested. Are ges from the Offering Ex. a separate n lition to the c with state lav	curities in the offeri the address given be to that address. W. Washington, Do of which must be mendments need only information previous emption (ULOE) for otice with the Secur- laim for the exemption. The Appendix to	ng. A notice is onelow or, if received. C. 20549. anually signed. y report the name of the notice constitution.	Any copies need the issue Parts A and E	with the U.S. S dress after the o ot manually si r and offering, B. Part E and o stes that have a ste where sales t shall accomp	gned must to any change the Appendiction are to be, any this form and must to the total transfer and must to the transfer and must transfer and m
Check Box(es) that Apply: Promoter	☐ Beneficial Ow	ner [Executive Office	er 🛮 Dire	ctor 🗆	General and Managing Pa	
Full Name (Last name first, if individual)		<u>-</u>				<u></u>	
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
Check Box(es) that Apply: Promoter	☐ Beneficial Own	ner C	Executive Office	er 🛘 Dire	ctor 🗆	General and Managing Pa	
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	Street, City, State,	Zip Code)					
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Own	ner C	l Executive Office	r 🗆 Dire	ctor 🛘	General Managing Pa	
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	1 Street, City, State,	Zip Code)				 	<u> </u>

					=======================================	1001 1507	m Orece	TNC				
·-··				B. IN	FORMAT	ION ABOU	T OFFER	TING			No	
				*	-11 4c	المحائلين وووو	munators in	this offerin	ua?	Yes	No X	
1. H	las the issuer	sold, or do	es the issuer	intend to s	SCII, TO NON- n Appendiv	accredited in the column 2 column 2	mvesiors in . if filing u	uus onerm nder ULOF	ig:		فنبتا	
2. V	Vhat is the mi	nimum inve	All stment that	will be acc	epted from	any individ	ual?			No 1	minimum	
2. •	vimi is the im	1111110111 1111	· · · · · · · · · · · · · · · · · · ·	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- r	•				Yes	No	
3. D	Ooes the offeri	ing permit j	oint owners	hip of a sir	igle unit?					X		
	Enter the infor		rantad fam ar	oh narcon	who has be	en or will h	e naid or g	iven directi	lv or indire	ctly, any co	mmission o	or similar
-	emuneration f	or solicitati	on of nurch	asers in co	nnection wi	th sales of s	securities in	the offerin	g. If a per	son to be li:	sted is an as	ssociated
n	erson or agen	t of a broke	r or dealer	registered '	with the SE	C and/or w	ith a state o	or states, lis	t the name	of the broke	er or dealer	. If more
tl	han five (5) pe	ersons to be	: listed are a	associated p	ersons of s	uch a broke	r or dealer,	you may s	et forth the	information	n for that b	roker or
d	lealer only. N	NOT APPL	ICABLE									
Full Name	(Last name f	first, if indi	vidual)	<u> </u>					1154	.		
		A 44 (No	S	Street City	State 7in	Code)						
Jusiness C	or Residence	naaress (Ni	imper and S	Lity	, эміс, Дір		<u>.</u>					
Name of A	Associated Br	oker or Dea	ıler								<u>. </u>	
States in V	Which Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
(Chec	k "All States"	or check i	ndividual St	ates)	□All State	es						
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO] [PA]
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[" 1]	[111]	[]	[]
Full Name	e (Last name	first, if indi	.vidual) 		<u>,</u>			<u> </u>				
Business	or Residence	Address (N	umber and	Street, City	, State, Zip	Code)						
Name of	Associated Bi	roker or De	aler									
States in	Which Person	Listed Has	Solicited o	r Intends to	Solicit Pu	rchasers		-	<u></u>			
(Chec	ck "All States	or check	individual S	tates)	□ All Stat	es						
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]] [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[vv v]	[** 1]	["1]	(* **)
Full Nam	ne (Last name	first, if ind	ividual)									
Business	or Residence	Address (N	lumber and	Street, Cit	y, State, Zi	p Code)						
Name of	Associated B	roker or De	ealer				<u>, , , , , , , , , , , , , , , , , , , </u>	<u>. </u>				
States in	Which Person	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	ırchasers		<u> </u>				
	eck "All State				□ All Sta							
•		s or eneck [AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[AL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	• -	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
וומן	_	ispi	itni	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
J	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ <u> </u>	\$ <u> </u>
	Equity	\$ <u>0</u>	\$ <u> </u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$ <u> </u>	\$ <u> </u>
	Limited Liability Company Interests	\$ <u> </u>	\$ <u> </u>
	Other (Specify: Limited Liability Company Interests)	\$ <u>16,000,000</u>	\$ <u> </u>
	Total	\$ <u>16,000,000</u>	\$ <u>0</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited Investors	-0-	-\$0-
	Non-accredited Investors	-0-	-\$0-
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>-0-</u>
	Printing and Engraving Costs		\$ <u>1,500</u>
	Legal Fees		\$75 <u>,000</u>
			\$ <u>2,500</u>
	Accounting Fees		\$ <u>-0-</u>
	Engineering Fees Soles Commissions (specify finders' fees separately)		\$ <u>-0-</u>
	Sales Commissions (specify finders)		\$ 3,475
	Other Expenses (identity) Bide on Thing I ess		\$82.475
	▽		382.475

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

EW YORK COMPANY, LLC lame of Signer (Print or Type):	Title of Signer (Print or Type): Manager of MJX Theatricals, Co-Manager of Abby Normal 1		Manager		
EW YORK COMPANY, LLC	Title of Signer (Print or Type):				
	7				
HE YOUNG FRANKENSTEIN		<u>_`</u>		Ju	ne 15, 2007
ssuer (Print or Type)	Signature			Da	ited as of
he issuer has duly caused this notice to be signed gnature constitutes an undertaking by the issuer aformation furnished by the issuer to any non-acc	to furnish to the U.S. Securities and Excha	inge Co	mmission, upor		
	D. FEDERAL SIGNATURE				
Column Totals		🗖	\$	X	\$15,917,525
		<u> </u>	\$		
Other (specify):			•••••		
Working capital		🗆	\$	X	\$15,917,525
- •			\$		\$ <u> </u>
that may be used in exchange for the asse merger)	ets or securities of another issuer pursuant to	o ā □	\$	0	\$
• • •	and facilitieshe value of securities involved in this offering		\$		\$ <u> </u>
	n of machinery and equipment		\$		\$ <u> </u>
			\$		\$ <u> </u>
	***************************************		\$		\$
		_	Payments to Officers, Directors, & Affiliates		Payments To Others
Indicate below the amount of the adjusted gross each of the purposes shown. If the amount of a check the box to the left of the estimate. The to gross proceeds to the issuer set forth in respon	any purpose is not known, furnish an estimat otal of the payments listed must equal the adj	te and		h	
is the "adjusted gross proceeds to the issuer."	e offering price given in response to Part C ponse to Part C - Question 4.a. This different				\$15,917,525
b. Enter the differences between the aggregate					

END