


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

07 FEB -8 AM 9:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000020486 1. Entity Name STUDIO 34 LLC	
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Principal Place of Business 550 BILTMORE WAY, SUITE 890 CORAL GABLES, FL 33134	Mailing Address 550 BILTMORE WAY, SUITE 890 CORAL GABLES, FL 33134
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DO NOT WRITE IN THIS SPACE



02022007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 56-2286655	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC.
515 E. PARK AVE.
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

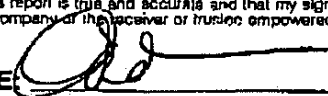
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ROUDNER, LEONARD 550 BILTMORE WAY #890 CORAL GABLES, FL 33134
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02/13/07--01049--024 **50.00

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10. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE  2/8/2007 305-444-8585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #