

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021692

Entity Name: HIGHER LEVEL MEDIA, LLC

FILED  
Feb 15, 2005  
Secretary of State

**Current Principal Place of Business:**

1523 N 46TH AVENUE  
HOLLYWOOD, FL 33316

**New Principal Place of Business:**

1523 N 46TH AVENUE  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

1523 N 46TH AVENUE  
HOLLYWOOD, FL 33316

**New Mailing Address:**

1523 N 46TH AVENUE  
HOLLYWOOD, FL 33021

FEI Number: 20-0907198

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PASAT, GHEORGHE  
617 SE 16TH STREET  
APT. #4  
FT. LAUDERDALE, FL 33316 US

**Name and Address of New Registered Agent:**

PASAT, GHEORGHE  
2050 NW 81 AVE  
APT. #222  
PEMBROKE PINES, FL 33024 US

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.

SIGNATURE: GHEORGHE PASAT

02/15/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: PASAT, GHEORGHE  
Address: 1523 N 46TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM ( ) Delete  
Name: QUIROZ, BRUCE  
Address: 1523 N 46TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: GHEORGHE PASAT

MGRM

02/15/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date