2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

9/12/2007-90040-018-$55.00-$55.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 SEP 26 PM 2:47

DOCUMENT # L04000057791

1. Entity Name
SUPERSONIC STUDIOS LLC

Principal Place of Business	Mailing Address
6157 N.W. 167 ST F-4 MIAMI, FL 33015, 33015	6157 NW 167 ST F-4 MIAMI, FL 33015

DO NOT WRITE IN THIS SPACE

09042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-1942717

☐ Applied For
☐ Not Applicab

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CUIFFO, STEVEN R
6157 N.W. 167 ST.
F-4
MIAMI, FL 33015

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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 accep the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 14, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	CELIS, GUSTAVO
STREET ADDRESS	6157 N.W. 167 ST # F-4
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	MGRM
NAME	CUIFFO, STEVEN R
STREET ADDRESS	6157 NW 167 ST # F-4
CITY-ST-ZIP	MIAMI, FL 33015
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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: _____