2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 13, 2005
Secretary of State

DOCUMENT# M02000003025

Entity Name: THE ANT FARM, LLC

Current Principal Place of Business:

110 S. FAIRFAX AVENUE
SUITE 200
LOS ANGELES, CA 90036

New Principal Place of Business:

Current Mailing Address:

110 S. FAIRFAX AVENUE
SUITE 200
LOS ANGELES, CA 90036

New Mailing Address:

FEI Number: 95-4572322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGRM	( ) Delete
Name:	GREENFELD, MICHAEL	
Address:	110 S. FAIRFAX AVENUE, SUITE 200	
City-St-Zip:	LOS ANGELES, CA 90036	
Title:	MGRM	( ) Delete
Name:	GLAZER, BARBARA	
Address:	110 S. FAIRFAX AVENUE, SUITE 200	
City-St-Zip:	LOS ANGELES, CA 90036	
Title:	MGRM	( ) Delete
Name:	DDB WORLDWIDE,	
Address:	437 MADISON AVENUE	
City-St-Zip:	NEW YORK, NY 10019	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: ANGELA JENSEN CONT 01/13/2005

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