

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001145

Entity Name: S.B. STUDIOS, LLC

FILED
Sep 05, 2005
Secretary of State

Current Principal Place of Business:

401 EAST LAS OLAS BLVD., SUITE 1400
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

3901 SW 47TH AVE, SUITE 400
FORT LAUDERDALE, FL 33314

Current Mailing Address:

401 EAST LAS OLAS BLVD., SUITE 1400
FORT LAUDERDALE, FL 33301

New Mailing Address:

1215 POLARIS PKWY, SUITE 249
COLUMBUS, OH 43240

FEI Number: 30-0125960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MANAGERS:

Title: MGRM () Delete
Name: CLARK, WENDY
Address: 401 EAST LAS OLAS BLVD., SUITE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: BEAUTY ALLIANCE VENT, URES, L.L.C.
Address: 401 EAST LAS OLAS BLVD., SUITE 1400
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLARK, WENDY
Address: 3901 SW 47TH AVE., SUITE 400
City-St-Zip: FORT LAUDERDALE, FL 33314

Title: MGRM (X) Change () Addition
Name: VONALLMEN, DOUG
Address: 3901 SW 47TH AVE., SUITE 400
City-St-Zip: FORT LAUDERDALE, FL 33314

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: DONNA MARTINEZ

MGR

09/05/2005

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