# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**May 02, 2006 8:00 am**
**Secretary of State**
05-02-2006 90036 034 ****50.00

**20042891**

DOCUMENT # L00000007726

1. Entity Name
IPHIMEDIA L.C.

| Principal Place of Business | Mailing Address |
|---|---|
| MUSEUM TOWER 100 WEST FLAGLER STREET<br>STE 2600<br>MIAMI, FL 33130 | MUSEUM TOWER 100 WEST FLAGLER STREET<br>STE 2600<br>MIAMI, FL 33130 |

04282006 Chg-LLC CR2E083 (11/05)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 1 SE 3rd Avenue | 1 SE 3rd Avenue |
| Suite, Apt. #, etc.<br>2900 | Suite, Apt. #, etc.<br>2900 |
| City & State<br>Miami Florida | City & State<br>Miami Florida |
| Zip / Country<br>33131-1711 / USA | Zip / Country<br>33131-1711 / USA |

4. FEI Number
65-1017919
☐ Applied For
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

BRUMER, MARC L
MUSEUM TOWER, STE. 2600
150 WEST FLAGLER ST.
MIAMI, FL 33130

**7. Name and Address of New Registered Agent**

Name: Brumer, Marc L
Street Address (P.O. Box Number is Not Acceptable): 1 SE 3rd Avenue
Suite 2900
City: Miami **FL** Zip Code: 33131-1711

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

**Filing Fee is $50.00**
**Due by May 1, 2006**

**Make check payable to Florida Department of State**

| 9. MANAGING MEMBERS / MANAGERS | | | 10. ADDITIONS / CHANGES | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGR<br>~~BEM~~, EUGENE S<br>545 8TH AVE #401<br>NEW YORK, NY 10018 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGR<br>Bem, Eugene S<br>309 W 43rd street suite 5D<br>New York, New York 10036 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
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| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

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:** _____ April 28, 2006 917-701-2732
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

ATTACHMENT
20064891
#L00000007726

**Iphimedia LC**

**309 W. 43rd Street Suite 5D**
**New York, New York 10036**

Florida Department of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, Florida 32301

April 28, 2006

Dear Division Corporations,

Enclosed is my annual report and a check for $50 for renewal of Iphimedia LC document number L00000007726 status as a Florida Limited Liability Company. Please note on the annual report that the address has changed for both the managing member and the registered agent.

Call me at 917-701-2732 if you have any questions or need additional information.

Sincerely,

Mr. Eugene S. Bem
Managing Member
Iphimedia LC