

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000065875

**Entity Name:** AMP2.TV LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

4698 BOCAIRE BLVD  
BOCA RATON, FL 33487

**Current Mailing Address:**

4698 BOCAIR BLVD  
BOCA RATON, FL 33487 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

HIGHLITE HOME CARE  
235 NE 6TH AVE  
SUITE C  
DELRAY BEACH, FL 33484 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name FREDERICK, SANTORY  
Address 1398 SW 9TH AVENUE  
City-State-Zip: BOCA RATON FL 33486

Title MGR  
Name HARMON, LINDA  
Address 1398 SW 9TH AVENUE  
City-State-Zip: BOCA RATON FL 33486

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FREDERICK SANTORY

**OWNER**

**04/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date