


**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90023 017 ****50.00

DOCUMENT # 1. Entity Name <u>ANDREW BRANDON ENTERTAINMENT LLC</u> <u>100000007218</u>			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business <u>1900 COLONIAL DRIVE</u> Suite, Apt. #, etc.		3. Mailing Address <u>1900 COLONIAL DRIVE</u> Suite, Apt. #, etc.	
City & State <u>CORAL SPRINGS, FL</u> Zip <u>33071</u> Country <u>USA</u>		City & State <u>CORAL SPRINGS, FL</u> Zip <u>33071</u> Country <u>USA</u>	
4. FEI Number <u>65-1131683</u>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent	
		Name <u>JACK ROUSSEVITZKY</u>	
		Street Address (P.O. Box Number is Not Acceptable) <u>1900 COLONIAL DRIVE</u>	
		City <u>CORAL SPRINGS</u> FL Zip Code <u>33071</u>	
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 <u>[Signature]</u> <u>JACK ROUSSEVITZKY PRES.</u>		DATE <u>4/7/03</u>	
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V.P.</u> <u>ANDREW ROUSSEVITZKY</u> <u>1900 COLONIAL DRIVE</u> <u>CORAL SPRINGS, FL 33071</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PRES.</u> <u>JACK ROUSSEVITZKY</u> <u>1900 COLONIAL DRIVE</u> <u>CORAL SPRINGS, FL 33071</u>	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 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 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: <u>[Signature]</u> <u>Pres.</u>		Date <u>4/7/03</u> Daytime Phone # <u>954 7961500</u>	

CR2E083B (12/02)