

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008238

FILED
Apr 29, 2009
Secretary of State

Entity Name: ENTERTAINMENT ZONE NO. 1, L.L.C.

Current Principal Place of Business:

201 SOUTH BISCAYNE BLVD., 34TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

201 SOUTH BISCAYNE BLVD., 34TH FLOOR
MIAMI, FL 33131

New Mailing Address:

FEI Number: 65-1025915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRELL GROUP CORPORATE SERVICES, LLC
201 S BISCAYNE BLVD 34TH FLR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

DA CASTIGLIONE, MAYRA C
201 S BISCAYNE BLVD 34TH FLR
MIAMI, FL 33131 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: MAYRA C. DA CASTIGLIONE

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MILTON M. FERRELL, JR.
Address: 201 SOUTH BISCAYNE BLVD SUITE 3400
City-St-Zip: MIAMI, FL 33131

Title: S (X) Delete
Name: MARQUARDT, ELIZABETH
Address: 201 SOUTH BISCAYNE BLVD., 34TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DA CASTIGLIONE, MAYRA C
Address: 201 SOUTH BISCAYNE BLVD SUITE 3400
City-St-Zip: MIAMI, FL 33131

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MAYRA C. DA CASTIGLIONE

MGR

04/29/2009

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