

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED**
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000009185 1. Entity Name FILMCOEX, L.L.C.	
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Principal Place of Business
**2800 GLADES CIRCLE
E 148
WESTON, FL 33327**Mailing Address
**2507 MONTCLAIRE CIRCLE
WESTON, FL 33327 4****DO NOT WRITE IN THIS SPACE**

04202007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
65-1031451Applied For
☐ Not Applicable5. Certificate of Status Desired ☐**\$5.00** Additional
Fee Required**6. Name and Address of Current Registered Agent****WOODBRIDGE, FREDERICK JR., ESQ
7700 N. KENDALL DRIVE, SUITE 809
MIAMI, FL 33166****DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-stating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007****9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FERNANDEZ, SERGIO 7372 N.W. 12TH ST. MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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05/11/07-80068-022 50.00****DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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 603, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

apr 20/07

Date

Daytime Phone # _____