

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000290

Entity Name: ADS DIGITAL STUDIO, LLC

FILED  
Jan 05, 2005  
Secretary of State

## Current Principal Place of Business:

12330 SW 53RD ST. #703  
COOPER CITY, FL 33330

## New Principal Place of Business:

12330 SW 53RD ST. #707  
COOPER CITY, FL 33330

## Current Mailing Address:

12330 SW 53RD ST. #703  
COOPER CITY, FL 33330

## New Mailing Address:

12330 SW 53RD ST. #707  
COOPER CITY, FL 33330

FEI Number: 65-1071047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROJAS, CAMILO  
12225 NW 57TH ST.  
CORAL SPRINGS, FL 33076 US

## Name and Address of New Registered Agent:

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

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: MORI, RODRIGO  
Address: 12330 SW 53RD ST. #703  
City-St-Zip: COOPER CITY, FL 33330

Title: MGRM ( ) Delete  
Name: THORSON, DAVID  
Address: 1444 SE 14TH ST  
City-St-Zip: DEERFIELD BEACH, FL 33441

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MORI, RODRIGO  
Address: 12330 SW 53RD ST. #707  
City-St-Zip: COOPER CITY, FL 33330

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MORI RODRIGO

MGR

01/05/2005

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