LIMITED LIABILITY COMPANY

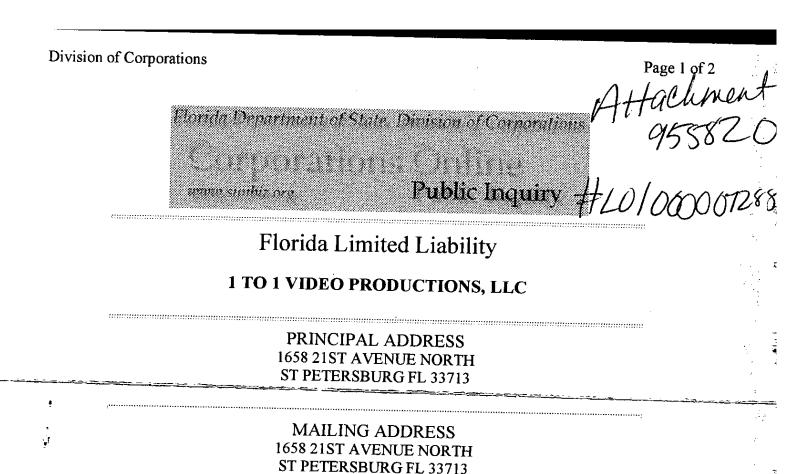
FILED May 07, 2002 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR) DOCUMENT #** L0100000 7285 1. Entity Name 05-07-2002 90388 031 ****50.00 I to I Video Productions LLC DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 12425 - 28th Street N. Suite, Apt. #, etc. 2425 - 28th Street N Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 102 City & State St. Peters burg 4. FEI Number Applied For Petersburg 04-3637296 Not Applicable Country 5. Certificate of Status Desired \$5.00 Additional Fee Required 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 28th Street N. Suite 102 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. FEE IS \$50.00 Make Check Payable to Department of State **DUE BY MAY 1** 9. MANAGING MEMBERS/MANAGERS Jeffrey M. Shimer TITLE President TITLE NAME NAME 1658 - 21st Avenue North STREET ADDRESS STREET ADDRESS CITY-ST-ZIP St. Peters burg, FL 33713 CITY: SI. 719 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE NAME. STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

GNATURE AND TYPED OR

CITY-ST-ZIP



Document Number L01000007285

FEI Number NONE

Date Filed 05/07/2001

State FL

Status ACTIVE Effective Date NONE

Total Contribution 0.00

Registered Agent

Name & Address

SHIMER, JEFF 1658 21ST AVENUE NORTH ST PETERSBURG FI 33713

Manager/Member Detail

Name & Address	Title
NONE	
	<u> </u>

Annual Reports

Report Year	Filed Date	Intangible Tax