

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000014888

1. Entity Name

IMAGINE MEDIA PRODUCTIONS, LLC



FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90040 038 ****50.00

Principal Place of Business Mailing Address
555 N.E. 15TH STREET, 7TH FLOOR 555 N.E. 15TH STREET, 7TH FLOOR
MIAMI FL 33132 MIAMI FL 33132

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1158490 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
BASTO, CARLOS
555 N.E. 15TH STREET, 7TH FLOOR
MIAMI FL 33132
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR BASTO, CARLOS 555 NE 15 ST #7726 MIAMI FL 33132
MGR MEYIA, DENNY S 555 NE 15 ST #7726 MIAMI FL 33132

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: [Signature] DATE: 04-09-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE