LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L01000017535

FLORIDA PRODUCTION HOLDINGS, LLC

DOCUMENT #

1. Entity Name

FILED Apr 30, 2002 8:00 am Secretary of State

04-30-2002 90015 015 ****50.00

Zin Code 33301

DO NO	OT WR	ITE IN	THIS	SPACE
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2. Principal Place of Business
3200 West Oakland Park Blvd.

Suite, Apt. #, etc.

3. Mailing Address
3200 West Oakland Park Blvd.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

City & State
Ft. Lauderdale, FL
Zip
33311-1245
US
Country
Tip
33311-1245
City & State
Ft. Lauderdale, FL
Tip
33311-1245
Country
Tip
33311-1245
US

Country
Tip
33311-1245
US

Applied For
Not Applied For
Not Applied For
Status Desired
To Status Des

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent				
Name Tanya L. Bower, Esq.				
Street Address (P.O. Box Number is Not Acceptable) Tripp Scott, P.A., 110 SE 6th St., 15th FL				

city Ft. Lauderdale

8.	The above named entity submits this statement for the purpose of changing its registered office or registered agent, or boin, in the state of Fichiola.	

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

FEE IS \$50.00

Make Check Payable to Department of State

		ble to Department of State E BY MAY 1	
9.	MANAGING MEMBERS/MANAGERS		
TITLE	Member Lakes Holding Trust c/o Tripp Scott, P.A., 110 SE 6th St 15th Floor Ft. Lauderdale, FL 33301 Member Lights, Cables, & Heavy Stuff, Inc. 4950 W. Prospect Road Ft. Lauderdale, FL 33309	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member President John Boisseau 1219 SW 5th Court Ft. Lauderdale, FL 33312-2418	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member North Beach Media, Inc. 342 Oak Street Hollywood, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Vice-President James Weinberg 342 Oak Street Hollywood, FL 33019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 John Boisseau, Member President Signature and typed or printed name of signing managing member, manager, or authorized representative

3/25/02

Daytime Phone #

CR2E083B (1)