

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000017535

1. Entity Name  
FLORIDA PRODUCTION HOLDINGS, LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 AUG 13 AM 8:30

Principal Place of Business  
3200 W. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33311-1245

Mailing Address  
3200 W. OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33311-1245

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

☐ 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

BOWER, TANYA L ESQ.  
TRIPP SCOTT, P.A.  
110 SE 6TH STREET, 16TH FLOOR  
FT. LAUDERDALE, FL 33301

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 Agents signature required when resigning)

DATE

Make Check Payment to Florida Department of State  
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME LAKES HOLDING TRUST  
STREET ADDRESS C/OTRIPPSCOTT, PA, 110 SE 6TH ST 15TH FLR  
CITY-ST-ZIP FORT LAUDERDALE, FL 33301 ☐ Delete

TITLE MGRM  
NAME LIGHTS, CABLES & HEAVY STUFF INC  
STREET ADDRESS 4950 W PROSPECT RD  
CITY-ST-ZIP FORT LAUDERDALE, FL 33309 ☐ Delete

TITLE P  
NAME BOISSEAU, JOHN  
STREET ADDRESS 1219 SW 6TH CT  
CITY-ST-ZIP FORT LAUDERDALE, FL 333122418 ☐ Delete

TITLE MGR  
NAME NORTH BEACH MEDIA INC  
STREET ADDRESS 342 OAK ST  
CITY-ST-ZIP HOLLYWOOD, FL 33019 ☐ Delete

TITLE V  
NAME WEINBERG, JAMES  
STREET ADDRESS 342 OAK ST  
CITY-ST-ZIP HOLLYWOOD, FL 33019 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE MGRM  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
800022287598 ☒ Change ☐ Addition  
08/13/03--01050--008 \*\*\$0.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MGRM  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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, Pres.

8/8/03

954-714-8100

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

Date

Daytime Phone #

CR2E083 (10/02)