

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000752

FILED  
Sep 01, 2007  
Secretary of State

Entity Name: RANDOM MEDIA, LLC

**Current Principal Place of Business:**

1250 SW 113TH TERRACE  
APT 203  
PEMBROKE PINES, FL 33025 US

**New Principal Place of Business:**

**Current Mailing Address:**

1250 SW 113TH TERRACE  
APT 203  
PEMBROKE PINES, FL 33025 US

**New Mailing Address:**

FEI Number: 04-3614288      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MULLINGS, ROBERT  
1250 SW 113TH TERRACE  
APT 203  
PEMBROKE PINES, FL 33025 US

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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MULLINGS, DAVID  
Address: 7936 COCONUT BLVD  
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: MGRM ( ) Delete  
Name: MULLINGS, ROBERT  
Address: 1250 SW 113TH TERRACE APT 203  
City-St-Zip: PEMBROKE PINES, FL 33025 US

**ADDITIONS/CHANGES:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT MULLINGS

MM

09/01/2007

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