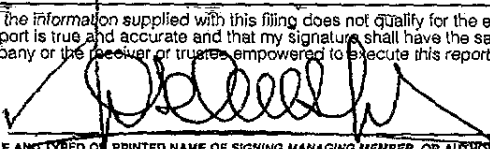


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000001532		
1. Entity Name FASICA ENTERTAINMENT GROUP, LLC		
Principal Place of Business 8360 WEST FLAGLER ST., STE.200 MIAMI, FL 33144	Mailing Address 8360 WEST FLAGLER ST., STE.200 MIAMI, FL 33144	
DO NOT WRITE IN THIS SPACE		02022005 No Chg-LLC CR2E083 (10/03)
		4. FEI Number 90-0176479
		Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent		
GIL, JOSE LUIS 8360 WEST FLAGLER ST., STE.200 MIAMI, FL 33144		DO NOT WRITE IN THIS SPACE
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 _____		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GIL, JOSE LUIS 8360 WEST FLAGLER ST., STE.200 MIAMI, FL 33144	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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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: 		3/31/05 ✓
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #