

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002690

Entity Name: SHOWMEDIA, LLC

FILED  
Apr 30, 2004  
Secretary of State

**Current Principal Place of Business:**

701 BRICKELL AVE.  
SUITE 3000  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

701 BRICKELL AVE.  
SUITE 3000  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 30-0044103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVE.  
SUITE 3000  
MIAMI, FL 33131

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

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/MEMBERS:**

Title: MGRP ( ) Delete  
Name: GILBERT, JAMES R  
Address: 701 BRICKELL AVE STE 3000  
City-St-Zip: MIAMI, FL 33131

Title: MGRS ( ) Delete  
Name: ABBERLEY, LESTER II  
Address: 701 BRICKELL AVE STE 3000  
City-St-Zip: MIAMI, FL 33131

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GILBERT, JAMES R  
Address: 701 BRICKELL AVE STE 3000  
City-St-Zip: MIAMI, FL 33131

Title: MGR (X) Change ( ) Addition  
Name: ABBERLEY, LESTER II  
Address: 701 BRICKELL AVE STE 3000  
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LESTER ABBERLEY, II

MGR

04/30/2004

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