2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003516

Entity Name: VIOLINSERENADE, L.L.C.

FILED May 09, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 450162 P.O. BOX 4963

FORT LAUDERDALE, FL 33345 US DEERFIELD BEACH, FL 33442 US

Current Mailing Address: New Mailing Address:

P.O. BOX 450162 P.O. BOX 4963

FORT LAUDERDALE, FL 33345 US DEERFIELD BEACH, FL 33442 US

FEI Number: 26-0051579 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:

BLOCH, JULIE N P.O. BOX 450162 BLOCH, JULIE N P.O. BOX 4963

FORT LAUDERDALE, FL 33345 US DEERFIELD BEACH, FL 33442 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.

in the State of Florida.

SIGNATURE: JULIE NISSA BLOCH 05/09/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 BLOCH, JULIE N
 Name:
 BLOCH, JULIE N

 Address:
 P.O. BOX 450162
 Address:
 P.O. BOX 4963

City-St-Zip: FORT LAUDERDALE, FL 33345 US City-St-Zip: DEERFIELD BEACH, FL 33442 US

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: JULIE NISSA BLOCH MGRM 05/09/2005