2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007355

City-St-Zip:

Entity Name: LEAF STORM PICTURES, LLC

FILED Apr 28, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5350 EAST KALEY STREET ORLANDO, FL 32812 **Current Mailing Address: New Mailing Address:** 5350 EAST KALEY STREET ORLANDO, FL 32812 FEI Number: 36-4494485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BETANCOURT, NELSON 5350 EAST KALEY STREET ORLANDO, FL 32812 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: ADDITIONS/CHANGES: () Delete Title: () Change () Addition BETANCOURT, NELSON Name: Name: Address: 5350 EAST KALEY STREET Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BETANCOURT, BARBARA JEAN Name: Address: 5350 EAST KALEY STREET Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition Name: BETANCOURT, AISLINN TESS Name: 5350 EAST KALEY ST Address: Address:

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.

City-St-Zip:

ORLANDO, FL 32812

SIGNATURE: NELSON BETANCOURT MM 04/28/2005