2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 18, 2005 08:00 AM Secretary of State DOCUMENT # L02000012422 1. Entity Name SHOWRIZ TAN, LLC Principal Place of Business Mailing Address 405 RACETRACK RD NE **405 RACETRACK RD NE** STE 101 FORT WALTON BEACH, FL. 32547 FORT WALTON BEACH, FL 32547 01052005 No Cha-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0450440 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE 4 ELEVENTH AVE. SUITE 1 SHALIMAR, FL 32579 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. (NOTE: Registered Agent eignature required when reinstating) Signature, typed or printed name of regletered agent and title 4 applicable. Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS ₽. MGR TITLE NETWORK VIDEO & ENTERTAINMENT, INC. NAME 405 RACETRACK RD NE STE 101 STREET ADDRESS CITY - ST - ZIP FT. WALTON BEACH, FL 32547 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DITY-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.

LLC Manager

OF SIGNING MAKAGING MEMBER, OF AUTHORIZED REPRESENTATIVE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME

FILED