

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90144 031 ****50.00

DOCUMENT # L02000017146

1. Entity Name
NEFERTITI PRODUCTIONS LLC



Principal Place of Business Mailing Address
~~PO BOX 2357~~ 411 N. New River Dr E ~~PO BOX 2357~~ 411 N. New River Dr E, Apt 701
FT. LAUDERDALE, FL 33303 Apt 701 FT. LAUDERDALE, FL 33301
33301 33301

00004204



01182007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
411 N. New River Drive E 411 N. New River Dr E
Suite, Apt. #, etc. Suite, Apt. #, etc.
701 701
City & State City & State
FORT LAUDERDALE, FL FT. LAUDERDALE, FL
Zip Country Zip Country
33301-3719 USA 33301-3719 USA

4. FEI Number Applied For
68-0524789 Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fec Required

6. Name and Address of Current Registered Agent

GORE, RICHARD S
411 N. NEW RIVER DR EAST, #701
FORT LAUDERDALE, FL 33301

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 *Richard S Gore*

1/18/07

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	<input checked="" type="checkbox"/> Delete
NAME	GORE, RICHARD	
STREET ADDRESS	PO BOX 2357	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33303	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	SPANGLER, DAVID	
STREET ADDRESS	1600 NE 18TH AVE	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305	
TITLE	MGRM	<input checked="" type="checkbox"/> Delete
NAME	YOCKEL, PETER D	
STREET ADDRESS	PO BOX 2357	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33303	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORE, RICHARD	
STREET ADDRESS	411 N. New River Dr E, Apt 701	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301-3719	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	MGRM	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOCKEL, PETER D	
STREET ADDRESS	411 N. New River Dr E, Apt 701	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301-3719	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Richard S Gore*

1/18/07 703-608-3700 (cell)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #