

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018737

FILED  
Apr 26, 2004  
Secretary of State

**Entity Name:** VOICE & IMAGE PRESS COMMUNICATIONS, LLC

**Current Principal Place of Business:**

17560 ATLANTIC BLVD. #205  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

2841 NE 163RD STREET  
211  
NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:**

17560 ATLANTIC BLVD. #205  
SUNNY ISLES, FL 33160

**New Mailing Address:**

2841 NE 163RD STREET  
211  
NORTH MIAMI BEACH, FL 33160

**FEI Number:** 03-0475085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ, SARA SAMANTHA  
17560 ATLANTIC BLVD. #205  
SUNNY ISLES, FL 33160

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

RODRIGUEZ, SARA SAMANTHA  
2841 NE 163RD STREET  
211  
NORTH MIAMI BEACH, FL 33160

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:

04/26/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RODRIGUEZ, SARA SAMANTHA  
Address: 17560 ATLANTIC BLVD. #205  
City-St-Zip: SUNNY ISLES, FL 33160

Title: MGR ( ) Delete  
Name: COMUNICACION ACTIVA,  
Address: CALLE MATIER 232 SAN BORJA  
City-St-Zip: LIMA, PERU,

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RODRIGUEZ, SARA SAMANTHA  
Address: 2841 NE 163RD STREET #211  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SARA SAMANTHA RODRIGUEZ

MGR

04/26/2004

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