

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90011 021 ****50.00

DOCUMENT # L02000019261

1. Entity Name
PROMOFILM MUSIC, LLC



Principal Place of Business
**520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131**

Mailing Address
**520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131**

20047330



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03182005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number

11-3662174

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRANSGLOBAL CORPORATE ADMINISTRATION, INC
520 BRICKELL KEY DRIVE, SUITE 0-305
MIAMI, FL 33131**

Name
TRANSGLOBAL CORP. ADMINISTRATION LLC
Street Address (P.O. Box Number is Not Acceptable)

520 BRICKELL KEY DRIVE, SUITE 0-305

City **MIAMI**

FL

Zip Code **33131**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **P** ☐ Delete
NAME **LEVIN, HERACIO**
STREET ADDRESS **520 BRICKELL KEY DR., STE 0-305**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **P, MGR** ☒ Change ☐ Addition
NAME **Horacio Levin**
STREET ADDRESS **520 Brickell Key Dr., Suite 0-305**
CITY-ST-ZIP **Miami, FL 33131**

TITLE **VP** ☒ Delete
NAME **GUJARDO, ERNESTO V**
STREET ADDRESS **520 BRICKELL KEY DR., STE 0-305**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CEO** ☐ Delete
NAME **GUTTMAN, DANIEL**
STREET ADDRESS **520 BRICKELL KEY DR., STE 0-305**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **CEO, D. MGR** ☒ Change ☐ Addition
NAME **Daniel Gutman**
STREET ADDRESS **520 Brickell Key Dr., Suite 0-305**
CITY-ST-ZIP **Miami, FL 33131**

TITLE **D** ☒ Delete
NAME **IRISARRI, JOSE M**
STREET ADDRESS **520 BRICKELL KEY DR., STE 0-305**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **MGR** ☐ Change ☒ Addition
NAME **Jose Miguel Contreras**
STREET ADDRESS **520 Brickell Key Dr., Suite 0-305**
CITY-ST-ZIP **Miami, FL 33131**

TITLE **S** ☐ Delete
NAME **FREEMAN, STEPHEN**
STREET ADDRESS **520 BRICKELL KEY DR., STE 0-305**
CITY-ST-ZIP **MIAMI, FL 33131**

TITLE **MGR** ☐ Change ☒ Addition
NAME **Daniel Eciija**
STREET ADDRESS **520 Brickell Key Dr., Suite 0-305**
CITY-ST-ZIP **Miami, FL 33131**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-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 appointed to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

Daniel Gutman 4/1/05 (305)374-3820