

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022931

FILED  
Jul 06, 2006  
Secretary of State

Entity Name: RECORD LABEL MUSIC LLC

## Current Principal Place of Business:

11111 BISCAYNE BLVD  
BLDG 1 # 700  
MIAMI, FL 33181

## New Principal Place of Business:

## Current Mailing Address:

11111 BISCAYNE BLVD  
BLDG 1 # 700  
MIAMI, FL 33181

## New Mailing Address:

FEI Number: 52-2375456      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

MURCIA, DENNIS  
11111 BISCAYNE BLVD  
BLDG 1 # 700  
MIAMI, FL 33181 US

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/MANAGERS:

Title: MGR ( ) Delete  
Name: MURCIA, DENNIS  
Address: 11111 BISCAYNE BLVD, BLDG 1 # 700  
City-St-Zip: MIAMI, FL 33181

Title: MGR ( ) Delete  
Name: TINOCO, GINA  
Address: 11111 BISCAYNE BLVD, BLDG 1 # 700  
City-St-Zip: MIAMI, FL 33181

## ADDITIONS/CHANGES:

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

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 Chapter 119, 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: DENNIS MURCIA

MGR

07/06/2006

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