

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000259

FILED
Apr 29, 2005
Secretary of State

Entity Name: REBEL REGION PRODUCTIONS LLC

Current Principal Place of Business:

58 KEY WEST CT
WESTON, FL 33326

New Principal Place of Business:

848 NORTH RAINBOW BLVD
757
LAS VEGAS, NV 89107

Current Mailing Address:

318 INDIAN TRACE
#721
WESTON, FL 33326

New Mailing Address:

848 NORTH RAINBOW BLVD
757
LAS VEGAS, NV 89107

FEI Number: 20-0583475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASON, ALSTON J
318 INDIAN TRACE
721
WESTON, FL 33326 US

Name and Address of New Registered Agent:

MASON, ALSTON J
58 KEY WEST CT
WESTON, FL 33326 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: ALSTON MASON

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MASON, ALSTON J
Address: 58 KEY WEST CT
City-St-Zip: WESTON, FL 33326 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MBR () Change (X) Addition
Name: MASON, NATHAN
Address: 64 SOUTH AVE
City-St-Zip: STATEN ISLAND, NY 10303

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: ALSTON MASON

MGRM

04/29/2005

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