

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000000507

**FILED**  
**May 12, 2004**  
**Secretary of State**

**Entity Name:** FISHER FILMS, LLC

**Current Principal Place of Business:**

940 LINCOLN ROAD SUITE 308  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

14359 MIRAMAR PARKWAY  
# 246  
MIRAMAR, FL 33027

**Current Mailing Address:**

940 LINCOLN ROAD SUITE 308  
MIAMI BEACH, FL 33139

**New Mailing Address:**

14359 MIRAMAR PARKWAY  
# 246  
MIRAMAR, FL 33027 US

**FEI Number:** 02-0671667

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOSHUA L. DUBIN, P.A.  
12000 BISCAYNE BLVD. PENTHOUSE 810  
MIAMI, FL 33181 US

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

FLORIDA LAYWER PROFESSIONAL ASSOC,  
2121 PONCE DE LEON BLVD.  
SUITE 430  
CORAL GABLES, FL 33134 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:** JOEL DEFABIO

05/12/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

**Title:** MGRM ( ) Change (X) Addition  
**Name:** FISHER PRODUCTIONS I, NC.  
**Address:** 14359 MIRAMAR PARKWAY # 246  
**City-St-Zip:** MIRAMAR, FL 33027

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:** WILLIAM FISHER

MGRM

05/12/2004

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