2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

1. Entity Name	MENT # L030000144 VAY FILMS IV, LLC	PAM HOOS	CEL LOSSIE		<u>504 384</u> 05-10-2004 900	15852 · . 011 048 ****50.0	0
Principal Place of Business 1191 EAST NEWPORT CENTER DR., STE. 210 DEERFIELD BEACH, FL 33442 Mailing Addipse LAHA 1191 EAST NEWPORT CI DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 3			ITER DR., STE. 210	((((((((((((((((((((FOIBL (78): GLACI BIBLE ÁLIBE LI	Cu l fil f r
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02122004	Chg-LLC	CR2E083 (10/03)	
City & State		City & State		4. FEI Numb	5823781	 	plied Fo
Zip	Country	Zip	Country		of Status Desired	S5.00 Add	
	6. Name and Address of Current F	egistered Agent		7. Name and	Address of New Re	gistered Agent	
			Name		-		
CASTELL, RONALD 1191 EAST NEWPORT CENTER DR., STE. 210 DEERFIELD BEACH, FL 33442			Street Address	s (P.O. Box Numb	er is Not Acceptable)		
	1		City			FL Zip Cod	е е
	named entity submits this statement for ons of registered agent.	the purpose of changing its reg	gistered office or regist	tered agent, or bo	oth, in the State of Flor	ida. I am familiar with,	and acr
SIGNATURE .	Signature, typed or printed name of registored agent at	nd title if applicable. (NOTE; Re	egistered Agent signature requi	ired whon reinstating)		DATE	
	ling Fee is \$50.00 ue by May 1, 2004	, .			Make Florida	check payable to Department of Stat	8
9.	MANAGING MEMBER	RS/MANAGERS	10.		ADDITIONS/0	HANGES	`
TITLE Q		Pcd □ Delete	TITLE		ADDITIONS (☐ Change	☐ Ad
NAME STREET ADDRESS CITY-ST-ZIP	RDP 1101 E. Howbert C Deerfield Box.		NAME STREET ADDRESS CITY-ST-ZIP			_ Shange	
TITLE V.P. NAME STREET ADDRESS CITY-ST-ZIP	Survise frodu 1191 E Newport Ct Deerfield Boh. FL	5.08.44.310	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	,	☐ Change	☐ Ad
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TITLE NAME STREET ADDRESS GITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	□ Ad

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther 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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: P. White

4-15-04

954-422-8