

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016219

Entity Name: STUDIO CB, L.L.C.

FILED
Feb 25, 2009
Secretary of State

Current Principal Place of Business:

800 WEST AVE 243
MIAMI BEACH, FL 33139

New Principal Place of Business:

800 WEST AVE
#243
MIAMI BEACH, FL 33139

Current Mailing Address:

800 WEST AV
243
MIAMI BEACH, FL 33139

New Mailing Address:

800 WEST AV
#243
MIAMI BEACH, FL 33139

FEI Number: 20-0065095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETANCOURT, CARLOS
800 WEST AVE #243
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: MGRM () Delete
Name: BETANCOURT, CARLOS
Address: 800 WEST AVE #243
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Delete
Name: ALBERTO, LATORRE
Address: 7728 COLLINS AVE #17
City-St-Zip: MIAMI BEACH, FL 33141

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 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: CARLOS BETANCOURT

MGRM

02/25/2009

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