2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023666

Entity Name: THE KIDZ ENTERTAINMENT, LLC

FILED Apr 07, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2157 BACOM POINT ROAD PAHOKEE, FL 33476

Current Mailing Address: New Mailing Address:

3625 COLLEGE AVENUE, #480 DAVIE, FL 33314

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

BUSINESS FILINGS INCORPORATED 660 EAST JEFFERSON STREET TALLAHASSEE, FL 32301 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/MEMBERS:

BOSTICK, BOBBY

4723 SABLE PINE CIRCLE, BLDG. 958 D-2

WEST PALM BEACH, FL 33417

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

MGRM () Delete () Change () Addition LOPEZ, NELSON JR Name: Name: 3625 COLLEGE AVE #480 Address: Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HERRERA, VICTOR Name: Name: Address: 2411 N. 61ST AVENUE Address: City-St-Zip: HOLLYWOOD, FL 33024 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition ADKINS, KEITH Name: Name: 167 YACHT CLUB WAY #304 Address: Address: City-St-Zip: HYPOLUXO, FL 33462 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition Name: LOPEZ, NELSON SR Name: 2157 BACOM POINT ROAD Address: Address: City-St-Zip: PAHOKEE, FL 33476 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition GOLDMAN, RICHARD Name: Name: 1098 NW BOCA RATON BLVD. Address: Address: City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: NELSON LOPEZ MGRM 04/07/2004