2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035701

Entity Name: PRIMEVISION COMMUNICATIONS LLC

FILED Mar 17, 2008 Secretary of State

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

1485 NORTH PARK DRIVE 2400 NORTH COMMERCE PKWY WESTON, FL 33326

SUITE 305

WESTON, FL 33326

Current Mailing Address: New Mailing Address:

1485 NORTH PARK DRIVE 2400 NORTH COMMERCE PKWY

WESTON, FL 33326 SUITE 305

WESTON, FL 33326

FEI Number: 90-0109738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WORKMAN, TOD WORKMAN, TOD

1485 NORTH PARK DRIVE 2400 NORTH COMMERCE PKWY

WESTON, FL 33326 SUITE 305 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: TOD WORKMAN 03/17/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

WORKMAN, TOD Name: WORKMAN, TOD Name: 1485 NORTH PARK DRIVE Address: 2400 NORTH COMMERCE PKWY SUITE 305 Address:

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete Title: MGRM (X) Change () Addition LEONE, STEVEN Name: LEONE, STEVEN Name:

Address: 1485 NORTH PARK DRIVE Address: 2400 NORTH COMMERCE PKWY SUITE 305

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete Title: MGRM (X) Change () Addition

GILBERT, WAYNE GILBERT, WAYNE Name: Name:

1485 NORTH PARK DRIVE 2400 NORTH COMMERCE PKWY SUITE 305 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: MGRM () Delete Title: MGRM (X) Change () Addition LESLIE, SCOTT Name: Name: LESLIE, SCOTT

1485 NORTH PARK DRIVE 2400 NORTH COMMERCE PKWY SUITE 305 Address: Address:

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

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: TOD WORKMAN MNGR 03/17/2008