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Secretary of State
05-02-2005 90090 044 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000041912

1. Entity Name
PIZZA SHOW ENTERTAINMENT, L.C.

Principal Place of Business	Mailing Address
C/O IRA C. HATCH, JR. 1701 HIGHWAY A1A, SUITE 220 VERO BEACH, FL 32963	C/O IRA C. HATCH, JR. 1701 HIGHWAY A1A, SUITE 220 VERO BEACH, FL 32963

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01122005No Chg-LLC CR2E083 (10/03)

4. FEI Number
20-0676548

☑ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HATCH, IRA C JR.
C/O HATCH & DOTY, P.A.
1701 HIGHWAY A1A, SUITE 220
VERO BEACH, FL 32963

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	~~MGRM~~
NAME	~~WESTON CAPITAL ASSETS, L.C.~~
STREET ADDRESS	~~1701 HIGHWAY A1A, SUITE 220~~
CITY-ST-ZIP	~~VERO BEACH, FL 32963~~
TITLE	MGRM
NAME	BUENA VISTA HOLDING GROUP, L.C.
STREET ADDRESS	1701 HIGHWAY A1A, SUITE 220
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ 4/20/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #