

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051417

Entity Name: FIREPROOF MUSIC, LLC

FILED
Feb 27, 2004
Secretary of State

Current Principal Place of Business:

2627 IVES DAIRY ROAD
SUITE 201
NORTH MIAMI BEACH, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

2627 IVES DAIRY ROAD
SUITE 201
NORTH MIAMI BEACH, FL 33180 US

New Mailing Address:

FEI Number: 33-1078512 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, RICHARD
2627 IVES DAIRY ROAD
SUITE 201
NORTH MIAMI BEACH, FL 33180 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/MEMBERS:

Title: MGR () Delete
Name: GREEN, RICHARD
Address: 2627 IVES DAIRY ROAD, SUITE 201
City-St-Zip: NORTH MIAMI BEACH, FL 33180 US

Title: MGR () Delete
Name: GREEN, MEG
Address: 2627 IVES DAIRY ROAD, SUITE 201
City-St-Zip: NORTH MIAMI BEACH, FL 33180 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GREEN, RICHARD
Address: 2627 IVES DAIRY ROAD, SUITE 201
City-St-Zip: NORTH MIAMI BEACH, FL 33180 US

Title: MGRM (X) Change () Addition
Name: GREEN, MEG
Address: 2627 IVES DAIRY ROAD, SUITE 201
City-St-Zip: NORTH MIAMI BEACH, FL 33180 US

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.

SIGNATURE: RICHARD GREEN

MR

02/27/2004

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