

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009365

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: ENTERTAINMENT UNLIMITED, LLC

**Current Principal Place of Business:**

1010 E SAMPLE ROAD  
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

1010 E SAMPLE ROAD  
POMPANO BEACH, FL 33064

**New Mailing Address:**

FEI Number: 20-0664345      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOLDING, STEPHEN M  
2950 W CYPRESS CREEK RD, STE 102  
FT. LAUDERDALE, FL 33309 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: KAHN FAMILY LIMITED, PARTNERSHIP  
Address: 2950 W CYPRESS CREEK RD, #102  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM ( ) Delete  
Name: MC MARKETING, INC.,  
Address: 8333 N MC NAB RD, #128  
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: MGRM ( ) Delete  
Name: GOLDING FAMILY LIMIT, ED PARTNERSHIP  
Address: 2950 W CYPRESS CREEK RD, #102  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM ( ) Delete  
Name: BERCIK, ROBERT  
Address: 3145 REPS MILLER RD, STE A  
City-St-Zip: NORCROSS, GA 30071

Title: MGRM ( ) Delete  
Name: HERSEY, GERALD F  
Address: 1314 E LAS OLAS BLVD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM ( ) Delete  
Name: ALMAR ENTERPRISES,  
Address: PO BOX 811733  
City-St-Zip: BOCA RATON, FL 33481

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES S. HALL

MGR

04/24/2008

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