## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000010373

Entity Name: HIP-HOP 411 T.V., LLC

Address:

City-St-Zip:

TAMPA, FL 33609

FILED Apr 20, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3007 WEST CYPRESS STREET SUITE 6 TAMPA, FL 33609 **New Mailing Address: Current Mailing Address:** 3007 WEST CYPRESS STREET SUITE 6 TAMPA, FL 33609 US FEI Number: 46-3847378 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: MADISON, DARRYL J 3007 WEST CYPRESS STREET SUITE 6 TAMPA, FL 33609 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/MANAGERS: ADDITIONS/CHANGES: MGRM (X) Delete Title: () Change () Addition PARAMOUNT CELEBRITY, MANAGEMENT COM P ANY, IN Name: Name: Address: 3007 WEST CYPRESS STREET Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: MIMIES HOUSE OF BEAU, TY, INC. Name: Address: 3007 WEST CYPRESS STREET Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: MGR () Delete Title: () Change () Addition DRAGTON, DETRICH Name: Name: 3007 WEST CYPRESS STREET Address: Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: MADISON, DARRYL J Name: 3007 WEST CYPRESS STREET Address: Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MADISON, MIREILLE T Name: Name: 3007 WEST CYPRESS STREET

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: DARRYL MADISON 04/20/2006