## 2008 LIMITED LIABILITY COMPANY

## Apr 18, 2008 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L04000017722** 04-18-2008 90149 049 \*\*\*138.75 INDY RADIO, LLC Principal Place of Business Mailing Address 1172 S DIXIE HWY #413 **4840 SW 80 STREET** MIAMI, FL 33146 MIAMI, FL 33143 02192008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3787547 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OASIS, RUSS DO NOT WRITE 4840 SW 80TH ST MIAMI, FL 33143 IN THIS SPACE 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MANAGING MEMBER TITLE OASIS, RUSS NAME 4840 SW 80 STREET STREET ADDRESS MIAMI, FL 33143 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my supplied with the same legal effect as if made under oath; that I am a managing member or manager of the fimited liability company or the xecute this report as required by Chapter 608, Florida Statutes

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED**