## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031713

Entity Name: CORAL GABLES PRODUCTIONS LLC

**FILED** May 18, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12596 SW 88TH STREET MIAMI, FL 33186

**Current Mailing Address: New Mailing Address:** 

12596 SW 88TH STREET MIAMI, FL 33186

FEI Number: 86-1137110 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

CELESTINE, JOSEPH L CEO CELESTINE, JOSEPH L 14909 SW 80ST 14909 SW 80ST SUITE 103 SUITE 103 MIAMI, FL 33193 US MIAMI, FL 33193 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: JOSEPH L CELESTINE

05/18/2007 Date

Electronic Signature of Registered Agent

## MANAGING MEMBERS/MANAGERS:

MGRM () Delete CELESTINE, JOSEPH L CEO Name: Address: 14909 SW 80 ST SUITE 103 City-St-Zip: MIAMI, FL 33193 US

Title: MGRM (X) Delete Name: LARACUENTE, TANNIA COO Address: 11161 SW 154 PLACE

MIAMI, FL 33196 US

City-St-Zip:

Title: (X) Change ( ) Addition LARACUENTE, TANNIA COO Name: Address: 11161 SW 154 PLACE City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES:

Address:

City-St-Zip:

Title: () Change () Addition Name:

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: TANNIA LARACUENTE 05/18/2007