

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040296

Entity Name: FETRO PRODUCTIONS, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1835 NE MIAMI GARDENS DR. #217
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

1611 SW 2ND CT.
UNIT 112
MIAMI, FL 33129

Current Mailing Address:

1835 NE MIAMI GARDENS DR. #217
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

1611 SW 2ND CT.
UNIT 112
MIAMI, FL 33129

FEI Number: 20-2583012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRKIC, MICHAEL JOSEPH
343 189 TERRACE
SUNNY ISLES BEACH, FL 33160 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: ALBA, ALEX
Address: 1226 DREXEL AVENUE, #305
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: ROBLETO, FREDDY
Address: 13465 SW 89 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: PRKIC, MICHAEL J
Address: 1611 SW 2ND CT., #112
City-St-Zip: MIAMI, FL 33129

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:

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: MICHAEL PRKIC

MGRM

04/29/2009

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