

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042053

FILED
Apr 10, 2008
Secretary of State

Entity Name: NIEPCE PRODUCTIONS, LLC

Current Principal Place of Business:

7640 NORTHWEST 180TH TERRACE
HIALEAH, FL 33015 US

New Principal Place of Business:

3750 W FLAGLER ST
CORAL GABLES, FL 33134 US

Current Mailing Address:

P.O. BOX 171433
HIALEAH, FL 33017 US

New Mailing Address:

P. O. BOX 441045
MIAMI, FL 33144 US

FEI Number: 20-1249235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, RODOLFO
7640 NORTHWEST 180TH TERRACE
MIAMI GARDENS, FL 33015 US

Name and Address of New Registered Agent:

GONZALEZ, RODOLFO MR.
7830 SW 14 TERRACE
MIAMI, FL 33144 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: RODOLFO GONZALEZ

04/10/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, RODOLFO
Address: 7640 NORTHWEST 180TH TERRACE
City-St-Zip: HIALEAH, FL 33015 US

Title: MGRM () Delete
Name: ROSELL, JOSE
Address: P. O. BOX 171433
City-St-Zip: MIAMI GARDENS, FL 33017 US

Title: MGRM (X) Delete
Name: RAMIREZ, ISABEL
Address: P. O. BOX 171433
City-St-Zip: MIAMI GARDENS, FL 33017 US

Title: MGRM (X) Delete
Name: BLANCO, ANDRES
Address: P. O. BOX 171433
City-St-Zip: MIAMI GARDENS, FL 33017 US

Title: MGRM (X) Delete
Name: HERNANDEZ, YENDER
Address: P. O. BOX 171433
City-St-Zip: MIAMI GARDENS, FL 33017 US

Title: MGRM (X) Delete
Name: NIEPCE PRODUCTIONS, LLC
Address: P. O. BOX 171433
City-St-Zip: MIAMI GARDENS, FL 33017 US

ADDITIONS/CHANGES:

Title: MR (X) Change () Addition
Name: GONZALEZ, RODOLFO MGR
Address: 3750 W FLAGLER ST
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MR (X) Change () Addition
Name: BLANCO, ANDRES MGRM
Address: 3750 W FLAGLER ST
City-St-Zip: CORAL GABLES, FL 33134 US

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: RODOLFO GONZALEZ

MGR

04/10/2008

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