2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2005
Secretary of State

DOCUMENT# L04000049652

Entity Name: AMCN HOLDINGS, LLC

Current Principal Place of Business:

1791 SUNWOOD BLVD
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

PO BOX 950361
LAKE MARY, FL 327950361

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AWAD, NARJ
1791 SUNWOOD BLVD
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

AWAD, MARK
PO BOX 950361
LAKE MARY, FL 32795 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: MARK AWAD 04/17/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: AWAD, MARK
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 327950361

Title: MGRM ( ) Delete
Name: AWAD, TONY
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 327950361

Title: MGRM ( ) Delete
Name: AWAD, ABDEL-MESSEEH S
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 327950361

Title: MGRM ( ) Delete
Name: AWAD, ANDREW
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 327950361

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR ( ) Change (X) Addition
Name: AWAD, NABILA
Address: PO BOX 950361
City-St-Zip: LAKE MARY, FL 32795

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK AWAD PRES 04/17/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date