

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052026

FILED
May 01, 2008
Secretary of State

Entity Name: OFF THE MENU ENTERTAINMENT, LLC

Current Principal Place of Business:

9721 SW 216 TERRACE
MIAMI, FL 33190

New Principal Place of Business:

Current Mailing Address:

9721 SW 216 TERRACE
MIAMI, FL 33190

New Mailing Address:

FEI Number: 20-1383372 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:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SPIERS, RICHARD J MR.
Address: 9721 SW 216 TERRACE
City-St-Zip: MIAMI, FL 33190 US

Title: MGRM () Delete
Name: WILLIAMS, ROGER A MR.
Address: 9721 SW 216 TERRACE
City-St-Zip: MIAMI, FL 33190

Title: MGRM () Delete
Name: MILLER, GARY MR.
Address: 37-39 SURBITON HILL ROAD
City-St-Zip: SURBITON, SU KT64TS UK

Title: MGRM () Delete
Name: PORTER, JOHN MR.
Address: 909 VALLEY VIEW AVE
City-St-Zip: MONROVIA, CA 91016 US

Title: MGRM () Delete
Name: STROBL, PETER MR.
Address: 909 VALLEY VIEW AVE
City-St-Zip: MONROVIA, CA 91016 US

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: () 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: ROGER WILLIAMS

MGRM

05/01/2008

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