2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000057015

Title:

Name:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Address:

City-St-Zip:

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SIGNATURE: RAFAEL A. JENES JR.

Entity Name: VENUS DREAMS PRODUCTIONS L.L.C.

FILED Dec 21, 2005 Secretary of State

New Principal Place of Business:

Current Principal Place of Business:		New Principal Place of Business:		
9710 W. EL MIRAMAR,		8500 MIRAMAR PKWY MIRAMAR, FL 33025 US		
Current Mailing Address:		New Mailing Address:		
9710 W. EL MIRAMAR,		8500 MIRAMAR PKWY MIRAMAR, FL 33025 US		
FEI Number: In accordance	10-1566413 FEI Number Applied For () se with s. 607.193(2)(b), F.S., the limited liability compa	FEI Number Not Applicable () Certificate of Status Desir ny did not receive the prior notice.	ed ()	
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:		
JENES, RAFAEL A JR. 9710 W. ELM LANE MIRAMAR, FL 33025 US		JENES, RAFAEL A JR. 8500 MIRAMAR PKWY MIRAMAR, FL 33025 US		
The above in the State		oose of changing its registered office or registered agent	, or both,	
SIGNATUR	RE: RAFAEL A. JENES JR.	12/21/2005		
	Electronic Signature of Registered Agent	Date		
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete ANNETTE, FAULK A JR. 9710 W. ELM LANE MIRAMAR, FL 33025 US	Title: MGR (X) Change () Addition Name: ANNETTE, JENES Address: 8500 MIRAMAR PKWY City-St-Zip: MIRAMAR, FL 33025 US		
Title: Name: Address: City-St-Zip:	MGRM () Delete JENES, RAFAEL A JR. 9710 W. ELM LANE MIRAMAR, FL 33025 US	Title: MGRM (X) Change () Addition Name: JENES, RAFAEL A JR. Address: 8500 MIRAMAR PKWY City-St-Zip: MIRAMAR, FL 33025 US		
Title: Name: Address: City-St-Zip:	() Delete	Title: MGR () Change (X) Addition Name: JENES, ADELAIDA C MANAGER Address: 20461 NW 46 AVE City-St-Zip: CAROL CITY, FL 33055		
Title: Name:	() Delete	Title: MGR () Change (X) Addition Name: COPELAND, MERCEDES A MANAGER		

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.

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Address:

City-St-Zip:

1274 NW 167 ST.

20461 NW 46 AVE

LEWIS. REGLA C

MIAMI, FL 33055

MGMR

PENBROKE PINES, FL 33028

JENES, DORIS MANAGER

19556 NW 55 CIRCLE PLACE

CAROL CITY, FL 33055

() Change (X) Addition

() Change (X) Addition

12/21/2005