

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058217

FILED
May 04, 2005
Secretary of State

Entity Name: SURRENDER ALL ENTERTAINMENT, LLC

Current Principal Place of Business:

5764 N. ORANGE BLOSSOM TRAIL
PMB 197
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

5764 N. ORANGE BLOSSOM TRAIL
PMB 197
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 74-3128297 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:

ROBINSON, WAVERLY L JR
5764 N. ORANGE BLOSSOM TRAIL
PMB 197
ORLANDO, FL 32810 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/MEMBERS:

Title: MGRM () Delete
Name: BRYANT, DARRYL
Address: 5764 N. ORANGE BLOSSOM TRAIL, PMB 197
City-St-Zip: ORLANDO, FL 32810 US

Title: MGRM () Delete
Name: ROUNDTREE, KELVIN
Address: 5764 N. ORANGE BLOSSOM TRAIL, PMB 197
City-St-Zip: ORLANDO, FL 32810 US

Title: MGRM () Delete
Name: ROBINSON, WAVERLY L JR
Address: 5764 N. ORANGE BLOSSOM TRAIL, PMB 197
City-St-Zip: ORLANDO, FL 32810 US

Title: MGRM () Delete
Name: SERAPHIN, HOWARD
Address: 5764 N. ORANGE BLOSSOM TRAIL, PMB 197
City-St-Zip: ORLANDO, FL 32810 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: MGRM (X) Change () Addition
Name: ERNEST, LESTER S
Address: 5764 N. ORANGE BLOSSOM TRAIL, PMB 1977
City-St-Zip: OCOEE, FL 32810 US

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: WAVERLY ROBINSON

MGR

05/04/2005

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