2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087187

Entity Name: PROLIFIC ENTERTAINMENT LLC

FILED Jun 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

620 N INDIGO RD 3321 WALTON RD ALTAMONTE SPRINGS, FL 32714 APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

620 N INDIGO RD 3321 WALTON RD ALTAMONTE SPRINGS, FL 32714 APOPKA, FL 32703

FEI Number: 81-0673683 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:

GARCIA, DOMINGO SADDLER, HOWARD A II 620 N INDIGO RD 3321 WALTON RD ALTAMONTE SPRINGS, FL 32714 US APOPKA, FL 32703 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.

ADDITIONS/CHANGES:

SIGNATURE: HOWARD A SADDLER II 06/13/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGR Title: (X) Change () Addition () Delete

GARCIA, DOMINGO SADDLER, HOWARD A II Name: Name: 620 N INDIGO RD Address: 3321 WALTON RD Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: APOPKA, FL 32703

Title: MGRM (X) Delete Title: () Change () Addition

Name: SADDLER, HOWARD Name: Address: 3321 WALTON RD Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip:

Title: MGRM () Delete Title: MGR (X) Change () Addition ST JEAN, ALBERT Name: ST JEAN, ALBERT Name:

3191 WINDCHIME CIRCLE WEST 3191 WINDCHIME CIRCLE WEST Address:

Address:

City-St-Zip: APOPKA, FL 32714 City-St-Zip: APOPKA, FL 32714

Title: MGRM () Delete Title: MGR (X) Change () Addition

JOHNSON, BRYANT Name: JOHNSON, BRYANT Name: 1318 HIGHLAND PARK PLACE Address: Address: 1318 HIGHLAND PARK PLACE

City-St-Zip: MARIETTA, GA 30067 City-St-Zip: MARIETTA, GA 30067

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: HOWARD A SADDLER II 06/13/2005