2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED Sep 05, 2006 8:00 am		
DOCUMENT # L05000000235					Secretary of Sta	
1. Entity Name HIT MAKERS MUSIC LLC					09-05-2006 90051 011 ****55	.00
			1			
Principal Place of Business Mailing Address						
P.O. BOX 840013 PEMBROKE PINES, FL 33084 US PEMBROKE PINES, FL		084 US		40102790		
						R ea l III (1.1)
2. Principal Place of Business 3. Mailing Address 1.200 NOTH			East_]	
Suite, Act. ", etc.		Suite, Aply, etc.			08032006 Chg-LLC CR2E083 (11/05)	ı
City & State Homestead Florida		City & State Horda Florida				pplied For ot Applicable
^{Zip} 3303	Country _	Zio 73 73 3	S USA		5. Certificate of Status Desired \$5.00 Ac	ditional
2502	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent	3u
FABRIKANT, KEVIN H ESQ.				csus Roman		
12000 BISCAYNE BLVD. Street				ddress (f	P.O. Box Number is Not Acceptable) 1200 Not	th
NORTH MIAMI BEACH, FL 33181			EV:	5+	4PT Place	
City Hom					nestcad FL ziege	<u>8533</u>
8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature (speed or printed north of registered agent and title if applicable (NOTE Registered Agent algorithm required when remissioning) DATE						
Filing Fee is \$50.00 Due by September 6, 2006 Make check payable to Florida Department of State						te
9.	MANAGING MEMBEI	RS/MANAGERS Deiete	TILE	. 6	ADDITIONS/CHANGES DY Change	Addition
NAME STREET ADDRESS	JIMENEZ, JESUS R		NAME STREET ADDRESS	120	10 Worth EVET BUST PLACE	
CITY-ST-ZIP	F-10 CALLE 2 FAJARDO, PR 00738		CITY-ST-ZIP	HO	mesterd Florida 33033	>
TITLE NAME	MGR JUSINO, EDGAR G	Delete	TITLE NAME	Jea	N Fernandez-Mgr Change	☐ Addition
STREET ADDRESS	8428 MIRAMAR PARKWAY		STREET ADDRESS	F (9	o-callez Ha Isidra 3 - Fajardo P.R. 007	38
CITY-SI-ZIP	MIRAMAR, FL 33025	Delete	CITY-ST-ZIP	SAN	44 121014 7 - Lithung L L 001	☐ Addition
NAME			NAME		_ ·•	
STREET ADDRESS CITY-SI-ZIP	<u> </u>	- .,	STREET ADDRESS City-St-Zip			
TITLE NAME		☐ Delete	TITLE NAME		Change	☐ Addition
STREET ADDRESS			STREET ADDRESS			ĺ
CITY-SI-ZEP TITLE	<u> </u>	☐ Delete	DITLE		Change	Addition
NAME STREET ADURESS			NAME STREET ADDRESS			}
CITY-ST-ZIP			CTTY-ST-ZEP			
TITLE NAME		☐ Delete	TITLE NAME		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
11. I hereby d	ertify that the information supplied with	this liting does not qualify for th	e exemptions co	ntained i	in Chapter 119, Florida Statutes. I further certify that the in	ormation
indicated on this report is true and accurate and that my 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: LEST JOSES ROMAN AGUST 28 2006.						
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