2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# L05000006912

Entity Name: ARENAL DIGITAL VIDEO PRODUCTIONS LLC

Current Principal Place of Business:

11350 SW 40 ST
MIAMI, FL 33165

New Principal Place of Business:

9357 FONTAINBLEAU BLVD
D107
MIAMI, FL 33172

Current Mailing Address:

11350 SW 40 ST
MIAMI, FL 33165

New Mailing Address:

9357 FONTAINBLEAU BLVD
D107
MIAMI, FL 33172

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENENDEZ, ANTHONY L
6144 SW 164 PLACE
MIAMI, FL 33193 US

Name and Address of New Registered Agent:

MENENDEZ, ANTHONY L
9357 FONTAINBLEAU BLVD
D107
MIAMI, FL 33172 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: ANTHONY L MENENDEZ 02/28/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MENENDEZ, ANTHONY L
Address: 6144 SW 164 PLACE
City-St-Zip: MIAMI, FL 33193

Title: MGRM (X) Delete
Name: MENENDEZ, JOSE A
Address: 11350 SW 40 ST
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MENENDEZ, ANTHONY L
Address: 9357 FONTAINBLEAU BLVD D107
City-St-Zip: MIAMI, FL 33172 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY L MENENDEZ MGRM 02/28/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date