

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009555

Entity Name: ART HOUSE PRODUCTIONS, LLC

FILED
May 22, 2007
Secretary of State

Current Principal Place of Business:

115 NW 167TH STREET
SECOND FLOOR
NORTH NORTH MIAMI, FL 33169 US

Current Mailing Address:

115 NW 167TH STREET
SECOND FLOOR
NORTH NORTH MIAMI, FL 33169 US

New Principal Place of Business:

115 NW 167TH STREET
SUITE 201
NORTH NORTH MIAMI, FL 33169 US

New Mailing Address:

115 NW 167TH STREET
SUITE 201
NORTH NORTH MIAMI, FL 33169 US

FEI Number: 43-2073060 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:

ANDRE GIBSON, CHARTERED
115 NW 167TH STREET
SECOND FLOOR
NORTH MIAMI BEACH, FL 33169 US

Name and Address of New Registered Agent:

ANDRE GIBSON, CHARTERED
115 NW 167TH STREET
SUITE 201
NORTH MIAMI BEACH, FL 33169 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: ANDRE GIBSON

05/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GERARDS, JOSEF B
Address: 545 8TH AVENUE, UNIT 401
City-St-Zip: NEW YORK, NY 10018 US

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify 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: JOSEF B GERARDS

MGRM

05/22/2007

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