

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011130

Entity Name: MUJIK ENTERPRISES, LLC

FILED
Jan 28, 2007
Secretary of State

Current Principal Place of Business:

32131 NORTHRIDGE DRIVE
WESLEY CHAPEL, FL 33544 US

New Principal Place of Business:

20326 CHESTNUT GROVE DR
TAMPA, FL 33647 US

Current Mailing Address:

32131 NORTHRIDGE DRIVE
WESLEY CHAPEL, FL 33544 US

New Mailing Address:

20326 CHESTNUT GROVE DR
TAMPA, FL 33647 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINICK, JEFFREY H
328 W. BEARSS AVENUE
TAMPA, FL FL US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: MGR () Delete
Name: HERRERO, BELEN M
Address: 32131 NORTHRIDGE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: MGR () Delete
Name: MUJIK, CHRISTOPHER L
Address: 32131 NORTHRIDGE DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HERRERO, BELEN M
Address: 20326 CHESTNUT GROVE DR
City-St-Zip: TAMPA, FL 33647 US

Title: MGR (X) Change () Addition
Name: MUJIK, CHRISTOPHER L
Address: 20326 CHESTNUT GROVE DR
City-St-Zip: TAMPA, FL 33647 US

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: BELEN HERRERO

MGR

01/28/2007

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