

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040630

Entity Name: STUDIO ONE - DOLPHIN, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

11401 NW 12TH STREET
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

14149 WESTFAIR EAST DRIVE
HOUSTON, TX 77041

New Mailing Address:

FEI Number: 81-0670896 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:

NICHOLS, JIM
13945 NW 22ND CT
PEMBROKE PINES, FL 330282826 US

Name and Address of New Registered Agent:

EVELETH, BOB
11401 NW 12TH STREET
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: BOB EVELETH

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STUDIO MANAGEMENT, INC.
Address: 14149 WESTFAIR EAST DRIVE
City-St-Zip: HOUSTON, TX 77041

Title: MGRM (X) Delete
Name: NICHOLS, JAMES
Address: 13945 NW 22ND CT
City-St-Zip: PEMBROKE PINES, FL 330282826 US

ADDITIONS/CHANGES:

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

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: BOB EVELETH

MGRM

05/01/2009

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