2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000042444

1. Entity Name

TAG ENTERTAINMENT, LLC



FILED
Apr 28, 2008 08:00 AN
Secretary of State

Principal Place of Business

6224 14TH STREET W. BRADENTON, FL 34207 Mailing Address

6224 14TH STREET W. BRADENTON, FL 34207



04232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2783035 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, P.A. 150 WEST FLAGLER ST., STE. 2200 C/O CARLOS CANINO MIAMI, FL 33130

DO NOT WRITE IN THIS SPACE

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. It am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent algosture required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000325574 05/20/08-80031-016 138.79

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	WHITE, CECIL
STREET ADDRESS	2673 MONOCACY FORD RD.
CITY-ST-ZIP	FREDERICK, MD 21701
TITLE	MGRM
NAME	WHITE, KEVIN
STREET ADDRESS	9327 HILLSBOROUGH
CITY-ST-ZIP	FREDERICK, MD 21701
TITLE	MGRM
NAME -	CONWAY, TIM
STREET ADDRESS	901 MEADOW GREEN DRIVE
CITY-ST-ZIP	MOUNT AIRY, MD 21771
TITLE	MGRM
NAME	WHITE, ANN
STREET ADDRESS	2673 MONOCACY FORD RD.
CITY-\$T-ZIP	FREDERICK, MD 21701
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information 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:

URE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANY GING MEMBER, OR AUTHORIZED REPRESEN

4/23/08

941-755-5505

Daytima Phone