

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064932

Entity Name: SURROUNDFX, LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

2851 BANYON BLVD CIRCLE
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2851 BANYON BLVD CIRCLE
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-3082088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUIS, JONATHAN D ES.Q
LAW OFFICE OS MELCER & LOUIS
4800 NORTH FEDERAL HIGHWAY, SUITE 300-D
BOCA RATON, FL 33431 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: MGRM () Delete
Name: TESTANI, ALAN J
Address: 2851 BANYON BLVD CIRCLE
City-St-Zip: BOCA RATON, FL 33431

Title: MGR () Delete
Name: LINDER, MARSHAL
Address: 54 MALLARD DRIVE
City-St-Zip: PITTSBURGH, PA 15238

Title: MGR () Delete
Name: LEAVITT, JOHN
Address: 7569 SANTEE TERRACE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TESTANI, ALAN
Address: 2851 BANYON BLVD CIRCLE
City-St-Zip: BOCA RATON, FL 33431

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: JOHN LEAVITT

MGR

01/14/2009

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