2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# L05000067416

Entity Name: LIFEWORKS ENTERTAINMENT, LLC

Current Principal Place of Business:

1411 SW 31ST AVE.
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1411 SW 31ST AVE.
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-3229362 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARCUS, IRA ESQ.
1313 S. ANDREWS AVE.
FT. LAUDERDALE, FL 33316 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: MINIACI, ALBERT
Address: 1411 SW 31ST AVE.
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM ( ) Delete
Name: MINIACI, BEATRIZ
Address: 1411 SW 31ST AVE.
City-St-Zip: POMPANO BEACH, FL 33069

Title: MEM ( ) Delete
Name: GLOBAL VISION LTD,
Address: 1411 SW 31 AVE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change ( ) Addition
Name: GLOBAL VISION LTD,
Address: 1411 SW 31 AVE
City-St-Zip: POMPANO BEACH, FL 33069

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: ALBERT MINIACI MGRM 04/27/2007

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