

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079719

Entity Name: HIPHOPGAME LLC

FILED  
Apr 07, 2006  
Secretary of State

## Current Principal Place of Business:

1221 BRICKELL AVE. #900  
MIAMI, FL 33131 US

## New Principal Place of Business:

1221 BRICKELL AVE.  
#900  
MIAMI, FL 33131 US

## Current Mailing Address:

1221 BRICKELL AVE. #900  
MIAMI, FL 33131 US

## New Mailing Address:

1221 BRICKELL AVE.  
#900  
MIAMI, FL 33131 US

FEI Number: 42-1678870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUILLEVERE, THOMAS  
100 EDGEWATER DR.,  
SUITE #244  
CORAL GABLES, FL 33133 US

## Name and Address of New Registered Agent:

QUILLEVERE, THOMAS  
1221 BRICKELL AVE.  
#900  
MIAMI, FL 33131 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: THOMAS QUILLEVERE

04/07/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MR ( ) Change (X) Addition  
Name: QUILLEVERE, THOMAS  
Address: 1221 BRICKELL AVE. #900  
City-St-Zip: MIAMI, FL 33131 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: THOMAS QUILLEVERE

MR

04/07/2006

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