

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080060

FILED
May 01, 2006
Secretary of State

Entity Name: ELEMENT RECORDINGS L.L.C.

Current Principal Place of Business:

171 N.W. 23RD STREET
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

171 N.W. 23RD STREET
MIAMI, FL 33131

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
WESTON, FL 33331 US

Name and Address of New Registered Agent:

ZIDEL, MITCHELL J ESQ.
155 SOUTH MIAMI AVENUE
PH-1D
MIAMI, FL 33130 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: MITCHELL ZIDEL

05/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BARRINGTON, LEO
Address: 351 N.W. 179 TERRACE
City-St-Zip: MIAMI, FL 33169

Title: MGRM () Delete
Name: LANGER, SCOTT
Address: 351 N.W. 179 TERRACE
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: ZIDEL, MITCHELL
Address: 171 N.W. 23RD STREET
City-St-Zip: MIAMI, FL 33131

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: MITCHELL ZIDEL

MGRM

05/01/2006

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