

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000087022

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** QUIMERA CREATIVE STUDIO LLC

**Current Principal Place of Business:**

2030 S. DOUGLAS RD.  
117  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

1825 PONCE DE LEON BLVD., STE. 378  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

**FEI Number:** 20-3541554

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LATTKE, BRYAN  
1401 SW 22ND STREET  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

LATTKE, BRYAN  
1825 PONCE DE LEON BLVD., STE. 378  
CORAL GABLES, FL 33134 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: \_\_\_\_\_

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LATTKE, BRYAN  
Address: 1825 PONCE DE LEON BLVD., STE. 378  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: SARAVIA, ADRIAN A  
Address: 1825 PONCE DE LEON BLVD., STE. 378  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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: BRYAN LATTKE

MGRM

02/16/2010

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