

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091647

FILED
Aug 01, 2007
Secretary of State

Entity Name: JUSTICIA ARTIST MANAGEMENT, LLC

Current Principal Place of Business:

407 LINCOLN ROAD
9L
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

407 LINCOLN ROAD
9L
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 20-3482832 FEI Number Applied For () 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:

Name and Address of New Registered Agent:

WILETS, JAMES D
1160 NE 100TH STREET
MIAMI SHORES, FL 33138 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILETS, JAMES D
Address: 1160 NE 100TH STREET
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: M () Delete
Name: FONT, LUIS
Address: 1160 NE 100TH STREET
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: M () Delete
Name: CAMPOS, JORGE C
Address: 7815 BYRON AVENUE, #1
City-St-Zip: MIAMI BEACH, FL 33141 US

ADDITIONS/CHANGES:

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

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: JAMES D. WILETS

MGM

08/01/2007

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