

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112124

**FILED**  
**Apr 20, 2006**  
**Secretary of State**

**Entity Name:** SILVERFOX SPORTS ENTERTAINMENT GROUP LLC

**Current Principal Place of Business:**

3101 PORT ROYALE BLVD., SUITE 238  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

3101 PORT ROYALE BLVD.  
SUITE 238  
FORT LAUDERDALE, FL 33308

**Current Mailing Address:**

3101 PORT ROYALE BLVD., SUITE 238  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

3101 PORT ROYALE BLVD.  
SUITE 238  
FORT LAUDERDALE, FL 33308

**FEI Number:** 20-3818785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD, #221E  
PALM BEACH GARDENS, FL 33410 US

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD  
#221E  
PALM BEACH GARDENS, FL 33410 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:

04/20/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LESNOCK, TRAYOR  
Address: 3101 PORT ROYALE BLVD., SUITE 238  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

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

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: TRAYOR LESNOCK

MGRM

04/20/2006

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