

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017525

FILED
Apr 30, 2009
Secretary of State

Entity Name: DREAMLAND PUBLICATIONS, LLC

Current Principal Place of Business:

8203 CYPRESS BREEZE WAY
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

3611 W. HILLSBOROUGH AVE
210
TAMPA, FL 33614 US

New Mailing Address:

1046 W. BUSCH BLVD
200
TAMPA, FL 33612 US

FEI Number: 20-4323422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEINGER, SIMMON E
8203 CYPRESS BREEZE WAY
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

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: VEINGER, SIMMON E
Address: 8203 CYPRESS BREEZE WAY
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: PINHASOV, VADIM
Address: 8203 CYPRESS BREEZE WAY
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: VISHER, MICHAEL
Address: 5305 WINDBRUSH DR
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: VISHER, MICHAEL
Address: 1046 W. BUSCH BLVD
City-St-Zip: TAMPA, FL 33671

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: SIMMON VEINGER

PRES

04/30/2009

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