2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE:

## May 03, 2007 8:00 am Secretary of State DOCUMENT # L06000023149 1. Entity Name 05-03-2007 90259 003 \*\*\*\*50.00 BLACKNWEITZ, LLC Principal Place of Business Mailing Address 433 N. CAMDEN DRIVE, STE 1070 BEVERLY-HILLS CA 90210 433 N. CAMDEN DRIVE, STE 1070 BEVERLY-HILLS CA 90210 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/06) 4. FEI Number 42-1696737 City & State City & State Applied For Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STARKE, LEONARDO D ESQ. Street Address (P.O. Box Number is Not Acceptable) 3340 MCDONALD STREET, COURTYARD SUITE MIAMI FL 33133 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES THE MGRM Delete DILE Change Addition NAME NAME **BLACK, STANLEY** STREET ADDRESS 433 N. CAMDEN DRIVE, STE 1070 STREET ADDRESS CHY-ST-7IP CITY-ST-ZIP **BEVERLY HILLS CA 90210** TITLE Delete Change ■ Addition MGR NAME NAME BLACK, JOYCE STREET ADDRESS STREET ADDRESS 433 N. CAMDEN DRIVE, STE 1070 CITY-SI-ZIP **BEVERLY HILLS CA 90210** CITY-S1-ZIP Oelete TITLE Addition THE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP ☐ Delete □ Change ■ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIILE ☐ Delete TITLE ☐ Addition NAMI NAME STREET ADDRESS STREET ADDRESS CUY-S1-7IP CHY-SI-7IP 11. I hereby certify that the information supplied with this tring does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**FILED** 

Date

Daytime Phone #

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Mailling Address  ASIN CAMDEN DRIVE, STE 1070 BEVERLY HILLS CA 90210  2. Principal Place of Business - No P.O. Box # 3. Mailing Address  Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   1st MOORE   CR2E683 (10/06)  Zop   Country   Zop   Country   Zop   Country   S. Certificate of Status Desired   Registered Agent   T. Name and Address of Current Registered Agent   T. Name and Address of New Registered Agent   Name	1. Entity Nam	MENT # L060000231 e WEITZ, LLC	ATTACHMENT				
A33 N. CAMBEN DRIVE, STE 1070   SEVERLY HILLS CA 90210   SEVERLY HILL	Principal Plac	a of Business	Mailing Address				
Sulle, Apt 4, etc.	433 N. CAN	IDEN DRIVE, STE 1070	433 N. CAMDEN DRIV	VE, STE 1070 90210	60048196		
City & State   Country	2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address				
Zip	Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E083 (10/06)		
Country	City & State		City & State		4. FEI Number 42-1696737	oplied For ot Applicable	
STARKE, LEONARDO D ESQ. 3340 MCDONALD STREET, COURTYARD SUITE    Sueet Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Country	5 Certificate of Status Desired S5.00 Ad	ditional	
STARKE, LEONARDO D ESQ. 3340 MCDONALD STREET, COURTYARD SUITE    City	6. Name and Address of Current Registered Agent			<u>'</u>			
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and a statement to the obligations of registered agent.  SIGNATURE    Signature, typed of printed name of registered agent and the 4 apolitication.   (NOTE: Propositioned Agent agent out registered agent, or both, in the State of Florida. I am familiar with, and a statement of registered agent, or both, in the State of Florida. I am familiar with, and a statement of Political Poli	334	O MCDONALD STREET, CO	OURTYARD SUITE				
8. The above named entity submits this statement for the purpose of changing its registered algent, or both, in the State of Florida. I am familiar with, and a the obligations of registered agent.  SIGNATURE    Separate, typed or printed name of registered agent and like if applicable.   (NOTE Registered Agant agentum rotured when tremaking)   DATE				City	F1 Zip Coo	le	
9. MANAGING MEMBERS MANAGERS 10. ADDITIONS / CHANGES 1111 MGM BLACK, STANLEY BLACK, STANLEY BLACK, STANLEY BLACK, STANLEY BLACK, STANLEY BLACK, STANLEY BLACK, STEET 1070 BEVERLY HILLS CA 90210 TITLE NAME STREET ADDRESS CITY-S1-2IP BEVERLY HILLS CA 90210 TITLE NAME STREET ADDRESS CITY-S1-2IP BLACK, JOYCE STREET ADDRESS CITY-S1-2IP BLACK, JOYCE STREET ADDRESS CITY-S1-2IP BLACK ADDR	the obligat	ions of registered agent.				and accept	
TITLE NAME STREET ADDRESS CITY-ST-ZIP  ITILE NAME STREET ADDRESS CITY-ST-ZIP	Make Check Payable to Florida Department of State						
NAME SIREET ADDRESS CITY-ST-ZIP  BLACK, STANLEY 433 N. CAMDEN DRIVE, STE 1070 BEVERLY HILLS CA 90210  Delete NAME BLACK, JOYCE A33 N. CAMDEN DRIVE, STE 1070 BEVERLY HILLS CA 90210  Delete NAME SIREET ADDRESS CITY-ST-ZIP  TITLE NAME SIREET ADDRESS CITY-ST-ZIP	9. MANAGING MEMBERS/MANAGERS 10.				ADDITIONS/CHANGES		
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NAME STREET ADDRESS: STREET ADDRESS CITY-SI-ZIP STREET ADDRESS CITY-ST-ZIP	name Street address		☐ Delete	NAME STREET ADDRESS	☐ Change	Addition	
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SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SKINING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  Date  Date  Description Prome #		URE:	A A			information lager of the	