2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000026504

Name:

Address:

City-St-Zip:

FORD, DESSALINES

PLANTATION, FL 33317

680 NORTHWEST 72 AVENUE

Entity Name: VAD MUSIC GROUP, LLC

FILED Sep 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3225 NORTHWEST 204 TERRACE MIAMI GARDENS, FL 33056 **Current Mailing Address: New Mailing Address:** 3225 NORTHWEST 204 TERRACE MIAMI GARDENS, FL 33056 FEI Number: 20-4502629 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: DESIRE, KEVIN L 3225 NORTHWEST 204 TERRACE MIAMI GARDENS, FL 33056 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete DESIRE, KEVIN L Name: Name: Address: 3225 NORTHWEST 204 TERRACE Address: City-St-Zip: MIAMI GARDENS, FL 33056 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WALLACE, ADA Name: Address: 18131 NORTHWEST 5 AVENUE Address: City-St-Zip: MIAMI GARDENS, FL 33169 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MOSES, ZOLA Name: Name: 3960 NORTHWEST 187 TERRACE Address: Address: City-St-Zip: MIAMI GARDENS, FL 33055 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KEVIN L. DESIRE MGR 09/11/2007