

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033922

Entity Name: FIREKID RECORDS, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

1900 COLONIAL DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

1900 COLONIAL DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 59-3838020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOUSSEVITZKY, ANDREW
1900 COLONIAL DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

KOUSSEVITZKY, JACK
1900 COLONIAL DRIVE
CORAL SPRINGS, FL 33071 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: JACK KOUSSEVITZKY

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KOUSSEVITZKY, ANDREW
Address: 1900 COLONIAL DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP () Delete
Name: KOUSSEVITZKY, JACK
Address: 1900 COLONIAL DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KOUSSEVITZKY, JACK
Address: 1900 COLONIAL DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM (X) Change () Addition
Name: KOUSSEVITZKY, ANDREW
Address: 1900 COLONIAL DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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: JACK KOUSSEVITZKY

MGR

04/22/2009

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