

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047869

FILED  
Sep 04, 2007  
Secretary of State

**Entity Name:** CLEAR RESOLUTION PRODUCTION COMPANY LLC

**Current Principal Place of Business:**

145 MADEIRA AVENUE  
SUITE 101  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

145 MADEIRA AVENUE  
SUITE 101  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-4842585      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

FISHER, DAVID M  
7200 S.W. 133 TERRACE  
MIAMI, FL 33156      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: FISHER, DAVID M  
Address: 7200 S.W. 133 TERRACE  
City-St-Zip: MIAMI, FL 33156

Title: MGR      ( ) Delete  
Name: KAPLAN, KARL J  
Address: 7 FOX RIVER CROSSING  
City-St-Zip: MAHWAH, NJ 07430

**ADDITIONS/CHANGES:**

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

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

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: DAVID FISHER

MGRM

09/04/2007

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