

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052460

Entity Name: INFRARED RECORDS, LLC

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

12105 N. MIAMI AVE.
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

PO BOX 681899
MIAMI, FL 33168 US

New Mailing Address:

FEI Number: 26-0292089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERCUSON, DAVID
9130 S. DADELAND BLVD., STE. 1800
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: MGR () Delete
Name: GAUVIN, BENDJILI
Address: 12105 NORTH MIAMI AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGR () Delete
Name: THELUSMA, HEINZ
Address: 12105 NORTH MIAMI AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGRM () Delete
Name: LILAVOIS, GAFFNEY
Address: 12105 NORTH MIAMI AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGR () Delete
Name: LILAVOIS, TONY
Address: 12105 NORTH MIAMI AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: MGR () Delete
Name: MAURISMA, RICHARD
Address: 2925 NW 126TH AVE, UNIT 219
City-St-Zip: SUNRISE, FL 33323

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

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

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

Title: MGR () Change (X) Addition
Name: CADET, EVENS R
Address: 12105 N. MIAMI AVE.
City-St-Zip: MIAMI, FL 33168

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: GAFFNEY LILAVOIS

MGRM

04/18/2009

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