## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053118

Entity Name: ICON EVENTS, LLC

FILED Jan 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1220 COLLINS AVE. 1688 MERIDIAN AVENUE

330 SUITE #400

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1220 COLLINS AVE. 1688 MERIDIAN AVENUE 330 SUITE #400

MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139

FEI Number: 20-8283351 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OROSZ, BRUCE
1220 COLLINS AVE.
OROSZ, BRUCE
1688 MERIDIAN AVENUE

330 SUITE #400 MIAM PEACLE EL 22420 LIS MIAM PEACLE EL 22420 LIS

MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 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: BRUCE OROSZ 01/23/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 OROSZ, BRUCE
 Name:
 OROSZ, BRUCE

 Address:
 1220 COLLINS AVE. 330
 Address:
 1688 MERIDIAN AVENUE, #400

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 BARR, DOUG
 Name:
 BARR, DOUG

 Address:
 1220 COLLINS AVE. 330
 Address:
 1688 MERIDIAN AVENUE. #400

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition OLYMPUS INTERNATIONA, L, AG Name: OLYMPUS INTERNATIONA, L, AG Name: 1688 MERIDIAN AVENUE, #400 Address: 1220 COLLINS AVE. 330 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE OROSZ MGR 01/23/2007