## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000094022

Entity Name: FEEL THE FLOW PRODUCTIONS, LLC

FILED Aug 06, 2007 Secretary of State

8600 BYRON AVE, UNIT 9 942 SW 3RD ST

MIAMI BEACH, FL 33141 BOCA RATON, FL 33486

Current Mailing Address: New Mailing Address:

8600 BYRON AVE, UNIT 9 942 SW 3RD ST

MIAMI BEACH, FL 33141 BOCA RATON, FL 33486

FEI Number: 20-5603939 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: Name and Address of New Registered Agent:

CHICO'S TAX & FINANCIAL SOLUTIONS, LLC 5190 NW 167 ST. SUITE 221A MIAMI, FL 33014 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:

MANAGING MEMBERS/MANAGERS:

Electronic Signature of Registered Agent Date

## Liectionic Signature of Registered

## ADDITIONS/CHANGES:

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

 Name:
 ALLERDYCE, JAMES
 Name:
 ALLERDYCE, JAMES

 Address:
 8600 BYRON AVE, UNIT 9
 Address:
 942 SW 3RD ST

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 BOCA RATON, FL 33486

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

 Name:
 VELEZ, WILLIAM
 Name:
 VELEZ, WILLIAM

 Address:
 8600 BYRON AVE, UNIT 9
 Address:
 942 SW 3RD ST

 City-St-Zip:
 MIAMI BEACH, FL 33141
 City-St-Zip:
 BOCA RATON, FL 33486

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

 Name:
 Name:
 ABELL, JONATHAN

 Address:
 Address:
 942 SW 3RD ST

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33486

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

 Name:
 Name:
 MINEO, JOHN DR.

 Address:
 Address:
 942 SW 3RD ST

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33486

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: JAMES ALLERDYCE MGRM 08/06/2007