

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095128

Entity Name: D.R.C. MEDIA CONSULTING, L.L.C.

FILED
Jan 25, 2007
Secretary of State

Current Principal Place of Business:

4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERFATY, CHARLES S ESQ.
4340 SHERIDAN STREET, SECOND FLOOR
HOLLYWOOD, FL 33021 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: CARRETTA, DONATO
Address: 18101 COLLINS AVENUE, STE. 807
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR () Delete
Name: WRIGHT, CARLINE
Address: 18101 COLLINS AVENUE, STE. 807
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: MGR (X) Delete
Name: JOUDET, RUDY
Address: 18101 COLLINS AVENUE, STE. 807
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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:

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: DONATO CARRETTA

MGR

01/25/2007

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