

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105987

Entity Name: JANA MUSIC, LLC.

FILED
Mar 07, 2009
Secretary of State

Current Principal Place of Business:

7 RUE RENOIR
COTO DE CAZA, CA 92679 US

New Principal Place of Business:

1913 60 ST.
10
BROOKLYN, NY 11204 US

Current Mailing Address:

7 RUE RENOIR
COTO DE CAZA, CA 92679 US

New Mailing Address:

1913 60 ST.
BROOKLYN, NY 11204 US

FEI Number: 20-5854626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PANE, GEORGINA R
7 RUE RENOIR
COTO DE CAZA, FL 92679 US

Name and Address of New Registered Agent:

PANE, GEORGINA R
555 NE 15 ST
7710
MIAMI, FL 33132 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: GEORGINA PANE

03/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PANE, GEORGINA R
Address: 7 RUE RENOIR
City-St-Zip: COTO DE CAZA, CA 92679 US

Title: MGR () Delete
Name: ANDORNO, NAZARENO M
Address: 7 RUE RENOIR
City-St-Zip: COTO DE CAZA, CA 92679 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PANE, GEORGINA R
Address: 1913 60 ST.
City-St-Zip: BROOKLYN, NY 33132 US

Title: MGR (X) Change () Addition
Name: ANDORNO, NAZARENO M
Address: 1913 60 ST.
City-St-Zip: BROOKLYN, NY 33132 US

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: GEORGINA PANE

MGRM

03/07/2009

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