2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2011
Secretary of State

DOCUMENT# L06000107810

Entity Name: MULTIVISIONS, LLC

Current Principal Place of Business:

1650 N.W. 128TH DRIVE, SUITE NO. 303
SUNRISE, FL 33323

New Principal Place of Business:

1650 N.W. 128TH DRIVE
303
SUNRISE, FL 33323 US

Current Mailing Address:

1650 N.W. 128TH DRIVE, SUITE NO. 303
SUNRISE, FL 33323

New Mailing Address:

1650 N.W. 128TH DRIVE
303
SUNRISE, FL 33323 US

FEI Number: 20-5944349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULLIGAN, LEESA
1650 N.W. 128TH DRIVE, SUITE NO. 303
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

MULLIGAN, LEESA
1650 N.W. 128TH DRIVE
303
SUNRISE, FL 33323 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: LEESA MULLIGAN 04/30/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: CEO
Name: MULLIGAN, LEESA
Address: 1650 N.W. 128TH DRIVE, SUITE NO. 303
City-St-Zip: SUNRISE, FL 33323 US

Title: ST
Name: MULLIGAN, LEESA
Address: 1650 N.W. 128TH DRIVE, SUITE NO. 303
City-St-Zip: SUNRISE, FL 33323 US

Title: P
Name: ALBURY, STEPHEN
Address: 1650 N.W. 128TH DRIVE, SUITE NO. 303
City-St-Zip: SUNRISE, FL 33323 US

Title: VP
Name: CRISTALDI, BOB
Address: 100 4TH AVE NW
City-St-Zip: LUTZ, FL 33548 US

I hereby 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 Statues.

SIGNATURE: LEESA MULLIGAN CEO 04/30/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date