2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 20, 2007 8:00 am
Secretary of State
08-20-2007 90182 006 ****55.00

DOCUMENT # L06000110298

1. Entity Name
GULF STREAM FILM LLC

60054945

Principal Place of Business	Mailing Address
5520 NW 21ST TERRACE HANGER 7 FT. LAUDERDALE, FL 33309	5520 NW 21ST TERRACE HANGER 7 FT. LAUDERDALE, FL 33309

08152007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5535 NW 23RD AVE	5535 NW 23RD AVE
Suite, Apt. #, etc. HANGAR 16	Suite, Apt. #, etc. HANGAR 16
City & State FT. LAUDERDALE FL	City & State FT. LAUDERDALE FL
Zip 33309 Country U.S.A.	Zip 33309 Country U.S.A.

4. FEI Number 77-0666441 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVIES, MARK R 5520 NW 21ST TERRACE HANGER 7 FT. LAUDERDALE, FL 33309	Name MARK DAVIES Street Address (P.O. Box Number is not acceptable) 5535 NW 23RD AVE HANGAR 16 City FT. LAUDERDALE FL 33309

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] Aug 10 2007
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 14, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM DAVIES, MARK 11837 LAURELWOOD DRIVE #9 STUDIO CITY, CA 91604	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM PESCHIERA, CESAR 1206 S. CRESCENT BLVD LOS ANGELES, CA 90035	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM EISENSTEIN, BRADLEY 421 HUDSON STREET , APT 717 NEW YORK, NY 10014	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [signature] Aug 10 2007 818458
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone 5115