


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 20, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000112788</b> 1. Entity Name <b>TAYJO MUSIC PRODUCTIONS, LLC</b>	
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Principal Place of Business <b>209 FAIRWAY DRIVE HAVANA, FL 32333</b>	Mailing Address <b>209 FAIRWAY DRIVE HAVANA, FL 32333</b>
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03182007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>33-1146350</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>CAMMARATA, ANTHONY 725 E. PARK AVENUE TALLAHASSEE, FL 32301</b>
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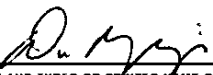
<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE _____ <small>Signature, handwritten or typed name of registered agent, must be filed with this report. (Filing fee required for this change.)</small>
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**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	<b>MGRM RIGGINS, DWAN A 209 FAIRWAY DRIVE HAVANA, FL 32333</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	<b>MGRM RIGGINS, KENNETH L 209 FAIRWAY DRIVE HAVANA, FL 32333</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	<b>MGRM RIGGINS, CYNTHIA D 209 FAIRWAY DRIVE HAVANA, FL 32333</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	<b>MGRM BELL, TAVIOUS 209 FAIRWAY DRIVE HAVANA, FL 32333</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

<b>U00000674036 03/29/07-80052-016 50.00</b>  <b>DO NOT WRITE IN THIS SPACE</b>
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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.  <b>SIGNATURE:</b>  <b>3/18/07</b> <b>1.800.971.1654</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>
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