

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012292

Entity Name: FASTFWD STUDIOS LLC

FILED
Aug 11, 2009
Secretary of State

Current Principal Place of Business:

1787 STARGAZER TERRACE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

1787 STARGAZER TERRACE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

A1A REGISTERED AGENT INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FL 33411 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DO, HAO X
Address: 1787 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: HENDERSON, COREY
Address: 1787 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: RIVERS, SANFORD
Address: 1787 STARGAZER TERRACE
City-St-Zip: SANFORD, FL 32771 US

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 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: COREY HENDERSON

MGRM

08/11/2009

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