

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033599

FILED
Apr 30, 2008
Secretary of State

Entity Name: BID 4 BEATS, LLC

Current Principal Place of Business:

200 EAST LAS OLAS BLVD.
SUITE 1850
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

200 EAST LAS OLAS BLVD.
SUITE 1850
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARROW, JAY L ESQ.
GARY J. ROTELLA & ASSOCIATES, P.A.
NEW RIVER CENTER #1850, 200 E. LAS OLAS BL
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

ROTELLA, GARY J ESQUIRE
GARY J. ROTELLA & ASSOCIATES, P.A.
NEW RIVER CENTER #1850, 200 E. LAS OLAS BL
FORT LAUDERDALE, FL 33301 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: GARY J. ROTELLA

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: O'NEILL, MICHAEL S
Address: 200 EAST LAS OLAS BLVD., STE. 1850
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: TUCCI, TODD E
Address: 200 EAST LAS OLAS BLVD., STE. 1850
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: TERPACK, KAAREN A
Address: 200 EAST LAS OLAS BLVD., STE. 1850
City-St-Zip: FORT LAUDERDALE, FL 33301

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: GARY J. ROTELLA

RA

04/30/2008

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