

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000056812

FILED
Apr 08, 2008
Secretary of State

Entity Name: AFRIRYTHMS E-NTERTAINMENT LLC

Current Principal Place of Business:

378 MAGUIRE VILLAGE #1
GAINESVILLE, FL 32603

New Principal Place of Business:

3009 SW ARCHER RD #C6
GAINESVILLE, FL 32608

Current Mailing Address:

378 MAGUIRE VILLAGE #1
GAINESVILLE, FL 32603

New Mailing Address:

3009 SW ARCHER RD #C6
GAINESVILLE, FL 32608

FEI Number: 22-3964893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: MGR () Delete
Name: KASOZI, GABRIEL
Address: 378 MAGUIRE VILLAGE #1
City-St-Zip: GAINESVILLE, FL 32603

Title: MGR () Delete
Name: SSEMATENGO, MIKE
Address: 378 MAGUIRE VILLAGE #1
City-St-Zip: GAINESVILLE, FL 32603

Title: S () Delete
Name: KASOZI, GABRIEL
Address: 378 MAGUIRE VILLAGE #1
City-St-Zip: GAINESVILLE, FL 32603

Title: T () Delete
Name: NANFUKA, ALLEN
Address: 378 MAGUIRE VILLAGE #1
City-St-Zip: GAINESVILLE, FL 32603

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KASOZI, GABRIEL
Address: 3009 SW ARCHER RD #C6
City-St-Zip: GAINESVILLE, FL 32608

Title: MGR (X) Change () Addition
Name: SSEMATENGO, MIKE
Address: 3009 SW ARCHER RD #C6
City-St-Zip: GAINESVILLE, FL 32608

Title: S (X) Change () Addition
Name: KASOZI, GABRIEL
Address: 3009 SW ARCHER RD #C6
City-St-Zip: GAINESVILLE, FL 32608

Title: T (X) Change () Addition
Name: NANFUKA, ALLEN
Address: 3009 SW ARCHER RD #C6
City-St-Zip: GAINESVILLE, FL 32608

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: GABRIEL KASOZI

MGR

04/08/2008

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