

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082897

FILED
Apr 30, 2008
Secretary of State

Entity Name: FE RECORDS AND PRODUCTIONS, LLC

Current Principal Place of Business:

125 NW 4TH AVENUE
2
HALLANDALE, FL 33009

New Principal Place of Business:

8416 SW 29TH STREET
MIRAMAR, FL 33025

Current Mailing Address:

125 NW 4TH AVENUE
2
HALLANDALE, FL 33009

New Mailing Address:

8416 SW 29TH STREET
MIRAMAR, FL 33025

FEI Number: 26-0700768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOLA, VICTOR A
125 NW 4TH AVENUE
2
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

ESPINOLA, VICTOR A
8416 SW 29TH STREET
MIRAMAR, FL 33025 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: VICTOR A ESPINOLA

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ESPINOLA, VICTOR A
Address: 125 NW 4TH AVENUE, SUITE 2
City-St-Zip: HALLANDALE, FL 33009

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ESPINOLA, VICTOR A
Address: 8416 SW 29TH STREET
City-St-Zip: MIRAMAR, FL 33025

Title: MGR () Change (X) Addition
Name: LUCIANO, NOELIA R
Address: 8416 SW 29TH STREET
City-St-Zip: MIRAMAR, FL 33025

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: NOELIA R LUCIANO

MGRM

04/30/2008

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