

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L07000094004

1. Entity Name

PANGAEA WORLD FESTIVAL LLC



Principal Place of Business

20900 NE 30TH AVE
STE 210
AVENTURA, FL 33180

Mailing Address

20900 NE 30TH AVE
STE 210
AVENTURA, FL 33180



02062008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

41-2254166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILVERIO, BRIAN M ESQ
150 W FLAGLER ST
PH 2850
MIAMI, FL 33130

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000829791
02/25/08-80052-024 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEZRAHI, GLADYS 20900 NE 30TH AVE - STE 210 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O INDIGO EVENTS CORPORATION 20900 NE 30TH AVE - STE 210 AVENTURA, FL 33180
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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

30/01/08 305-931-7370

Date

Daytime Phone #