


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 10, 2008 8:00 am
Secretary of State

09-10-2008 90031 012 ***138.75

| | |
|--|---|
| DOCUMENT # L07000118217 |  |
| 1. Entity Name PATAGONIA FILM GROUP, LLC | |

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|---|---|
| Principal Place of Business 1835 EAST HALLANDALE BL. SUITE 328 HALLANDALE BEACH, FL 33009 | Mailing Address 1835 EAST HALLANDALE BL. SUITE 328 HALLANDALE BEACH, FL 33009 |
|---|---|

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|--|---------|---------------------|---------|
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

60040000



07132008 Chg-LLC CR2E083 (12/06)

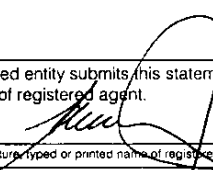
| | |
|------------------------------------|--|
| 4. FEI Number 61-1548233 | Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
|---|---------------------------------------|

| | |
|--|--|
| 6. Name and Address of Current Registered Agent | |
| A1A REGISTERED AGENT INC. 5647 110TH AVE. NORTH ROYAL PALM BEACH, FL 33411-0000 | |

| | |
|--|-----------------|
| 7. Name and Address of New Registered Agent | |
| Name EDWARD MONTES-BRADLEY | |
| Street Address (P.O. Box Number is Not Acceptable) 1835 East Hallandale BL Suite 328 | |
| City HALLANDALE BEACH | FL 33309 |

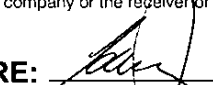
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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|---|--|-----------------------|
| SIGNATURE  | (NOTE: Registered Agent signature required when reinstating) | Date 9/5/08 |
|---|--|-----------------------|

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| FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 | In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. | Make check payable to Florida Department of State |
|--|--|--|

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|--|--|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MONTES-BRADLEY, EDWARD 1835 EAST HALLANDALE BL. SUITE 328 HALLANDALE BEACH, FL 33009 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM LIENDO, SOLEDAD 1835 EAST HALLANDALE BL. SUITE 328 HALLANDALE BEACH, FL 33009 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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:  | Date 9/5/08 | Daytime Phone # (954) 925-1342 |
|---|-----------------------|--|

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

EDWARD MONTES-BRADLEY