

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006795

Entity Name: ELEMENTAL STUDIOS, LLC

FILED  
Sep 08, 2009  
Secretary of State

## Current Principal Place of Business:

1253 S PINE ISLAND RD.  
PLANTATION, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

321 WILSON ST  
A204  
HOLLYWOOD, FL 33019 US

## New Mailing Address:

1253 S. PINE ISLAND RD  
PLANTATION, FL 33324 US

FEI Number: 32-0233653

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSWALD, SARAH E  
321 WILSON ST  
A204  
HOLLYWOOD, FL 33019 US

## Name and Address of New Registered Agent:

OSWALD, SARAH E  
1500 SW 57TH AVE  
PLANTATION, FL 33317 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:

09/08/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: OSWALD, SARAH E  
Address: 321 WILSON ST, A204  
City-St-Zip: HOLLYWOOD, FL 33019 US

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

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

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: OSWALD, SARAH E  
Address: 1500 SW 57TH AVE  
City-St-Zip: PLANTATION, FL 33317 US

Title: MGR ( ) Change (X) Addition  
Name: CASPER, CHRISTIANNE  
Address: 1500 SW 57TH AVE  
City-St-Zip: PLANTATION, FL 33317 US

Title: MGR ( ) Change (X) Addition  
Name: MOTTOLA, DONNA  
Address: 856 NW 81ST AVE  
City-St-Zip: PLANTATION, FL 33324 US

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: SARAH E OSWALD

MGR

09/08/2009

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