

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019827

FILED
May 01, 2009
Secretary of State

Entity Name: URBAN CHEMISTRY RECORDINGS LLC

Current Principal Place of Business:

4302 HOLLYWOOD BLVD.
335
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

7850 NW 10TH STREET
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

4302 HOLLYWOOD BLVD.
335
HOLLYWOOD, FL 33021 US

New Mailing Address:

4302 HOLLYWOOD BLVD.
353
HOLLYWOOD, FL 33021 US

FEI Number: 26-2595286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
320 S. FLAMINGO ROAD
347
PEMBROKE PINES, FL 33027 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: MGRM () Delete
Name: MERLINO, MARK J
Address: 4302 HOLLYWOOD BLVD., SUITE 335
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: MGRM () Delete
Name: JENNINGS, JAMES E
Address: 4302 HOLLYWOOD BLVD., SUITE 335
City-St-Zip: HOLLYWOOD, FL 33021 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARK MERLINO

MGRM

05/01/2009

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