

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000013853

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** HIGH INTENSITY PRODUCTIONS LLC

**Current Principal Place of Business:**

1100 N.E. 125 TH STREET  
SUTIE 210  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

10055 N.W. 7 TH AVENUE  
MIAMI, FL 33150

**Current Mailing Address:**

1100 N.E. 125 TH STREET  
SUTIE 210  
NORTH MIAMI, FL 33161

**New Mailing Address:**

10055 N.W. 7 TH AVENUE  
MIAMI, FL 33150

**FEI Number:** 27-3985239

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLGREN, CARROLL-LYNN  
830 N.E. 199TH ST  
A#108  
NORTH MIAMI BEACH, FL 33179 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:** PSDT  
**Name:** WILLGREN, CARROLL-LYNN  
**Address:** 830 NE 199TH STREET A#108  
**City-St-Zip:** NORTH MIAMI, FL 33179

I hereby 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:** CARROLL-LYNN WILLGREN

PSDT

04/27/2011

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