

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000072401

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** EMPIRE BALLROOM STUDIOS LLC

**Current Principal Place of Business:**

5889 CARRIAGE DRIVE  
SARASOTA, FL 34243

**New Principal Place of Business:**

5889 CARRIAGE DR.  
SARASOTA, FL 34243

**Current Mailing Address:**

5889 CARRIAGE DRIVE  
SARASOTA, FL 34243

**New Mailing Address:**

**FEI Number:** 27-3023776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

POCIUS, ZYDRUNAS  
5889 CARRIAGE DR.  
SARASOTA, FL 34243 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:** ZYDRUNAS POCIUS

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** POCIUS, ZYDRUNAS  
**Address:** 5889 CARRIAGE DRIVE  
**City-St-Zip:** SARASOTA, FL 34243

**Title:** S  
**Name:** POCIUS, ZYDRUNAS  
**Address:** 5889 CARRIAGE DRIVE  
**City-St-Zip:** SARASOTA, FL 34243

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:** ZYDRUNAS POCIUS

OWNE

04/26/2011

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