


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2007 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # L98000001071 1. Entity Name MEGAPOP, L.C. |  |
|--|---|

| | |
|--|--|
| Principal Place of Business C/O JAN CARSON CHEEZEM 201 S. BISCAYNE BLVD., STE 850 MIAMI, FL 33131 | Mailing Address C/O JAN CARSON CHEEZEM 201 S. BISCAYNE BLVD., STE 850 MIAMI, FL 33131 |
|--|--|

DO NOT WRITE IN THIS SPACE



01082007 No Chg-LLC CR2E083 (11/05)

| | |
|---|--------------------------------|
| 4. FEI Number 65-0883110 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

ROSSZ FIU CORPORATION
 201 S. BISCAYNE BLVD., STE 850
 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when changing) DATE _____

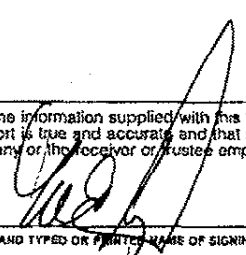
Filing Fee is \$50.00
Due by May 1, 2007

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR LOPEZ, MARIA E 201 SOUTH BISCAYNE BOULEVARD, STE 850 MIAMI, FL 33131 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

DO NOT WRITE IN THIS SPACE

1100000586135
01/16/07-80042-001 50.00

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:  1/10/07 305.775.7118

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Day/Mo/Phone #