

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003035

FILED
May 01, 2006
Secretary of State

Entity Name: SHOWTIME PICTURES, L.L.C.

Current Principal Place of Business:

501 SE 12TH ST.
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

501 SE 12TH ST.
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0927133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE, SUITE 125
CORAL GABLES, FL 33146 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: MEM () Delete
Name: ARIN, A. KEMAL
Address: 12901 STIRLING RD.
City-St-Zip: FT LAUDERDALE, FL 33330

Title: MEM () Delete
Name: ARIN, ESRA
Address: 1201 STIRLING RD.
City-St-Zip: FT LAUDERDALE, FL 33330

ADDITIONS/CHANGES:

Title: MEM (X) Change () Addition
Name: ARIN, A. KEMAL
Address: 501 SE 12TH STREET
City-St-Zip: FT LAUDERDALE, FL 33316

Title: MEM (X) Change () Addition
Name: ARIN, ESRA
Address: 501 SE 12TH STREET
City-St-Zip: FT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the 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: A KEMAL ARIN

MGR

05/01/2006

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