

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 27, 2005 8:00 am
Secretary of State

07-27-2005 90013 036 ****58.75

DOCUMENT # L99000009196

1. Entity Name
ITALY TV MARKET, L.L.C.



Principal Place of Business
782 N.W. LEJEUNE ROAD, SUITE 428
MIAMI, FL 33126

Mailing Address
782 N.W. LEJEUNE ROAD, SUITE 428
MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE



06022005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-0976600

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

PUIG, MAGALI L
782 N.W. LEJEUNE ROAD, SUITE 428
MIAMI, FL 33126

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
CAPITAL TRENDS HOLDING, CORP.
782 N.W. LEJEUNE ROAD, SUITE 428
MIAMI, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ITALTEAM ENTERPRISE, CORP.
782 N.W. LEJEUNE ROAD, SUITE 428
MIAMI, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
PUIG, MAGALI L
782 NW LEJUNE RD STE 428
MIAMI, FL 33126

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Magali L. Puig Manager*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #