


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**APPROVED 12, 2004 08:00 AM**  
 Secretary of State  
 DATE: 01-08-04  
**APPROVED BY:**

DOCUMENT # M01000001799  
 1. Entity Name  
 FAHLGREN ENTERTAINMENT, LLC



Principal Place of Business 3230 W. COMMERCIAL BLVD. SUITE 380 OAKLAND PARK, FL 33309	Mailing Address 3230 W. COMMERCIAL BLVD. SUITE 380 OAKLAND PARK, FL 33309
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**DO NOT WRITE IN THIS SPACE**



01082004No Chg-LLC CR2E083 (10/03)

4. FEI Number 58-2632402	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

KALITE, LORI  
 3230 W. COMMERCIAL BLVD.  
 SUITE 380  
 OAKLAND PARK, FL 33309

**BATCH ID**  
 JAN 08 2004

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$50.00  
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PARHAM, BELINDA S 3495 PIEDMONT ROAD BLDG. 11, STE. 910 ATLANTA, GA 30305
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**RECEIVED**  
 JAN 08 2004  
**PAYABLES**

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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: *Kathy J. White* DATE: 01-08-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE