## 2005 LIMITED LIABILITY COMPANY, ANNUAL REPORT

## FILED Apr 16, 2005 08:00 AM Secretary of State

| _ |   |    |     |     |   |      |     |      |     |            | <br> |  |
|---|---|----|-----|-----|---|------|-----|------|-----|------------|------|--|
|   | O | CL | JN. | 1EN | T | # MC | 100 | າດດເ | 118 | <b>185</b> |      |  |

6. Name and Address of Current Registered Agent

1. Entity Name
WARMING HOUSE RECORDS, L.L.C.



Principal Place of Business

Mailing Address

11621 KEW GARDENS AVENUE

SUITE 210 PALM BEACH GARDENS, FL 33410

REICH, DOUG

NAME

11621 KEW GARDENS AVENUE SUITE 210 PALM BEACH GARDENS, FL 33410



## DO NOT WRITE IN THIS SPACE

04112005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1130078

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

| REICH, DOUG<br>11621 KEW GARDENS AVENUE, STE. #210 | <br>DO NOT WRITE |
|--|------------------|
| PALM BEACH GARDENS, FL 33410                       | - IN THIS SPACE  |

|        | above named entity submits this statement for the purpose of cha<br>bligations of registered agent. | anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accep | t  |
|--------|---|---|----|
| SIGNAT | URE   | (NOTE Registered Agent signature required when reinstating) DATE  | ٠: |
|        | Filing Fee is \$50.00<br>Due by May 1, 2005   |   | _  |
| 9.     | MANAGING MEMBERS/MANAGERS   |   | +  |
| TITLE  | MGRM  |   |    |

| STREET ADDRESS<br>CITY-ST-ZIP                  | 11621 KEW GARDENS AVE STE 210<br>PALM BEACH GARDENS, FL 33410 | //0/000310325<br>04/16/05-80072-009 50.00 |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | ,   | · -                                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   | DO NOT WRITE                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          |   | IN THIS SPACE                             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |   |
| TITLE  |   |   |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fforida 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 required or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP

DOUG REICH

4/12/05

561-622-8343

OR PHINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #