

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001197

FILED  
Jan 21, 2007  
Secretary of State

**Entity Name:** VIRTUAL BROADCASTING INFORMATION CENTER (VBIC) L.L.C.

**Current Principal Place of Business:**

3237 FAIRFIELD DRIVE  
KISSIMMEE, FL 34743

**New Principal Place of Business:**

**Current Mailing Address:**

3237 FAIRFIELD DRIVE  
KISSIMMEE, FL 34743

**New Mailing Address:**

**FEI Number:** 52-2213830

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MGRM ( ) Delete  
Name: CAMES, TERESA M  
Address: 3237 FAIRFIELD DRIVE  
City-St-Zip: KISSIMMEE, FL 34743

Title: MGRM ( ) Delete  
Name: OLAF, CAMES  
Address: 3237 FAIRFIELD DRIVE  
City-St-Zip: KISSIMMEE, FL 34743

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CAMES

MR.

01/21/2007

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