

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 11, 2004 8:00 am
Secretary of State

05-11-2004 90001 013 ****50.00

DOCUMENT # M03000002755

1. Entity Name

SECOND STREET GROUP GP, LLC



Principal Place of Business

5150 OVERLAND AVENUE
CULVER CITY, CA 90230

Mailing Address

5150 OVERLAND AVENUE
CULVER CITY, CA 90230

DO NOT WRITE IN THIS SPACE



04152004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

42-1594743

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLORIDA FILING & SEARCH SERVICES, INC.
1333 NORTH DUVAL
TALLAHASSEE, FL 32303

**DO NOT WRITE
IN THIS SPACE**

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 May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME KEST, MICHAEL
STREET ADDRESS 5150 OVERLAND AVENUE
CITY-ST-ZIP CULVER CITY, CA 90230

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
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 MICHAEL KEST, MANAGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/22/04 (310) 204-2050
Date Daytime Phone #