

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 26, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M03000003308**

1. Entity Name  
**LIVESHOP TV, LLC**



Principal Place of Business

**17250 DALLAS PKWY., STE. 200  
DALLAS, TX 75248**

Mailing Address

**17250 DALLAS PKWY., STE. 200  
DALLAS, TX 75248**



01172007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-0097374**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301**

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGR  
FRANK, WALTER J JR.  
17250 DALLAS PKWY., STE. 200  
DALLAS, TX 75248**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGR  
SANCHEZ, LORI  
17250 DALLAS PKWY., STE. 200  
DALLAS, TX 75248**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGR  
DENNY, LUDWELL  
17250 DALLAS PKWY., STE. 200  
DALLAS, TX 75248**

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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04/03/07-80005-023 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

*Walter J. Frank Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*3/20/07 972-407-374*

Date

Daytime Phone #