

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003183

Entity Name: AUDIOHOLICS L.L.C.

FILED  
Mar 20, 2009  
Secretary of State

**Current Principal Place of Business:**

10923 RAIN LILY PASS  
LAND O LAKES, FL 34638

**New Principal Place of Business:**

**Current Mailing Address:**

8631 LITTLE ROAD, SUITE 1  
BOX 118  
NEW PORT RICHEY, FL 34654

**New Mailing Address:**

FEI Number: 83-0404437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DELLASALA, GENE  
10923 RAIN LILY PASS  
LAND O LAKES, FL 34638 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: DELLASALA, GENE  
Address: 10923 RAIN LILY PASS  
City-St-Zip: LAND O LAKES, FL 34638

Title: MGRM ( ) Delete  
Name: DELLASALA, BERTHA  
Address: 10923 RAIN LILY PASS  
City-St-Zip: LAND O LAKES, FL 34638

**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 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: BERTHA DELLASALA

MGRM

03/20/2009

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