2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2009
Secretary of State

DOCUMENT# M06000003839

Entity Name: AUDIOLINK, L.L.C.

Current Principal Place of Business:

18 JOHN STREET
SUITE 300
NEW YORK, NY 10038

New Principal Place of Business:

Current Mailing Address:

420 RIVERSIDE DRIVE,
#6F
NEW YORK, NY 10025

New Mailing Address:

FEI Number: 48-1175980 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

POMA, FRANK
10501 SOUTH ORANGE AVE.
122
ORLANDO, FL 32824 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: MGR ( ) Delete
Name: FINGER, GAIL
Address: 15 MAIDEN LANE, #300
City-St-Zip: NEW YORK, NY 10038

Title: MGR ( ) Delete
Name: HERTZ, VICTOR
Address: 15 MAIDEN LANE, #300
City-St-Zip: NEW YORK, NY 10038

Title: MGR ( ) Delete
Name: POMA, FRANK
Address: 10501 S. ORANGE AVE., #122
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: FINGER, GAIL
Address: 420 RIVERSIDE DRIVE
City-St-Zip: NEW YORK, NY 10025

Title: MGR (X) Change ( ) Addition
Name: HERTZ, VICTOR
Address: 420 RIVERSIDE DRIVE
City-St-Zip: NEW YORK, NY 10025

Title: MGR (X) Change ( ) Addition
Name: POMA, FRANK
Address: 5800 NORTH BANANA RIVER BLVD
City-St-Zip: CAPE CANAVERAL, FL 32920

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: FRANK POMA VP 01/28/2009

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