

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000003839

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**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  
**Name:** FINGER, GAIL  
**Address:** 420 RIVERSIDE DRIVE  
**City-St-Zip:** NEW YORK, NY 10025

**Title:** MGR  
**Name:** HERTZ, VICTOR  
**Address:** 420 RIVERSIDE DRIVE  
**City-St-Zip:** NEW YORK, NY 10025

**Title:** MGR  
**Name:** POMA, FRANK  
**Address:** 5800 NORTH BANANA RIVER BLVD  
**City-St-Zip:** CAPE CANAVERAL, FL 32920

I hereby 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

02/26/2010

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