213-488-0240

Daytime Phone #

## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M9800000383  1. Entity Name MANPAY LLC						FILED 03 APR 30 AH 10: 58						
Principal Plac 2835 NORTH N BURBANK CA S	aomi street	Mailing Address C/O LAW OFFICES OF JAMES DONOVAN 515 S. FIGUEROA STREET. SUITE 1000 LOS ANGELES CA 90071-3327		_	SECRETARY OF STATE TALLAHASSEE FLORIDA							
2. Principal P Suite, Apt.	face of Business	3. Mailing Address C/O BEN-ZVI AND BECK Suite, Apt. #, etc.										
City & State		611 W. SIXTH STREET, #2620 City & State LOS ANGELES, CA				. CHECK HERE IF MAKING CHANGES  4. FEI Number 88-0391093 Applied For					oplied For	]
Zìp	Country	<sup>Zip</sup> 90017	Count U.S	•		5. Certificate of Status Desired			Fe	\$5.00 Additional Fee Required		
<del></del>	6. Name and Address of Current	Registered Agent		Name		Name and	d Address of	New Regis	tered Ag	ent	<del>-</del>	4
1201	PORATION SERVICE COMPANY I HAYS STREET LAHASSEE FL 32301-2525				idress (P.O. I	Box Numb	er is Not Acce	eptable)				-
				City			·		FL	Zip Cod	e	1
the obligati	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent				registered as		oth, in the State	e of Florida	. I am fan	niliar with,	and accept	
. ,	MANAGING MEMBE	Make Check Payab	e By Ma	EE IS \$5 rida Depa y 1, 2003	artment of	State	AFOU	TIONS/CHA	MOES			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DRANEY, ROBERT W 410 NEVADA HIGHWAY, SUITE : BOULDER CITY NV 89005	☐ Detete		ſ		<b>90</b> 04/30	7010 1 1/03010			] Change 1.5∰ 155.00	Addition	CR2E083 (10/02)
TITLE Name Street address City-St-Zip	MGR PETERSON, JACK L 410 NEVADA HIGHWAY, SUITE : BOULDER CITY NV 89005	□ Delete		ł		-				] Change	Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DONOVAN, JAMES M 515 S. FIGUEROA ST., STE. 100 LOS ANGELES CA 90071	<b>◯</b> Delete		T ADDRESS	MGR FABRICI 2029 CI	ENTURY	VARD D. 7 PARK E <del>CA 9</del> 0	AST, 9		2600	Addition	
TITLE NAME Street address City-St-Zip		☐ Delete			200.11		, <b>a</b> r- <u>2</u> 0	,00)	Ē	] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		f						Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1	T ADDRESS ST-ZIP			<del>-</del>	<del>-</del>		] Change	Addition	
indicated	ertify that the information supplied with on this report is true and accurate and pility company or the receiver or trustee	that my signature shall have	the same	legal effect	t as if made I	under oatr	i: that I am a	tutes. I furti managing r	ner certify member c	that the ir or manage	nformation r of the	

SIGNATURE: SIGNATURE: AREA PEQUIACK ID. Peterson, Manager 4/2//2003

SIGNATURE AREA PEDITOR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date