

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 92177 017 \*\*\*\*55.00

**DOCUMENT # M98000000388**

1. Entity Name

**PRODCOMM LLC**



Principal Place of Business

**2835 NORTH NAOMI STREET  
BURBANK CA 91504**

Mailing Address

**C/O LAW OFFICES OF JAMES M DONOVAN  
515 S. FIGUEROA STREET STE 1000  
LOS ANGELES CA 90071-3327**

2. Principal Place of Business

3. Mailing Address

**C/O BEN-ZVI & BECK**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**611 W. SIXTH STREET, #2620**

City & State

City & State

**LOS ANGELES, CA**

Zip

Country

Zip

Country

**90017**

**U.S.A.**

4. FEI Number

**88-0391090**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$5.00 Additional  
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

**FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Florida Department of State  
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
DRANEY, ROBERT W  
410 NEVADA HIGHWAY, SUITE 200  
BOULDER CITY NV 89005** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
PETERSON, JACK L  
410 NEVADA HIGHWAY, SUITE 200  
BOULDER CITY NV 89005** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
DONOVAN, JAMES M  
515 S. FIGUEROA ST., STE. 1000  
LOS ANGELES CA 90071** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
FABRICK, HOWARD D.  
2029 CENTURY PARK EAST, SUITE 2600  
LOS ANGELES, CA 90017** ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
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☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** *Jack L. Peterson* **REQUIRED** Jack L. Peterson, Manager 4/21/2003 213-488-0240

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

Date

Daytime Phone #

CR2E083 (10/02)