



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 97624		2. Exact name of the limited liability company Capital Media Communication, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island The development and distribution of film video and other media products.			
5. Principal office address Vastmannagatan 107A S-113 43 Stockholm, Sweden		City		State	Zip
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name David F. Fox, Esq.		Contact Title Resident Agent			
Street Address 850 Aquidneck Ave. B-11		City Middletown		State RI	Zip 02842
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐					
Manager Name Bo Backman		Manager Name			
Street Address Vastmannagatan 107A S-113 43 Stockholm, Sweden		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

OCT 15 2012

BY _____

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OCT 15 2012

BY 3555

File Date
Check No
By
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, and the accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Date

David F. Fox, Resident Agent for Bo Backman

Print or Type Name of Authorized Person