

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 06, 2006  
Secretary of State**

DOCUMENT# L03000014741

Entity Name: MICJOSH, LLC

**Current Principal Place of Business:**  
9155 SOUTH DADELAND BOULEVARD  
1006  
MIAMI, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**  
9155 SOUTH DADELAND BOULEVARD  
1006  
MIAMI, FL 33156

**New Mailing Address:**

FEI Number: 33-1105109      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

LEVEY, JEFFREY E  
9155 SOUTH DADELAND BOULEVARD  
1006  
MIAMI, FL 33156 US

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:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: LEVEY, JEFFREY E  
Address: 9155 SOUTH DADELAND BLVD., SUITE 1006  
City-St-Zip: MIAMI, FL 33156

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: LEVEY, MARTHA B  
Address: 9155 SOUTH DADELAND BLVD., SUITE 1006  
City-St-Zip: MIAMI, FL 33156

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY E. LEVEY

MGRM

01/06/2006

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