2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 02, 2006 08:00 Al Secretary of State DOCUMENT # M03000002756 JG GROUP GP, LLC Principal Place of Business Mailing Address 5150 OVERLAND AVENUE **5150 OVERLAND AVENUE** CULVER CITY, CA 90230 CULVER CITY, CA 90230 04182006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 95-6331077 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FLORIDA FILING & SEARCH SERVICES, INC. 1333 NORTH DUVAL TALLAHASSEE, FL 32303 IN THIS SPACE 5. 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, typod or printed name of registered agent and title if applicable. DATE (NOTE, Registered Agent algorature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TILE GOLDRICH, JONA NAME U00000559409 05/17/06-80136-003 50.00 STREET ADDRESS 5150 OVERLAND AVENUE CITY-ST-ZIP CULVER CITY, CA 90230 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TODE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADERESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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.

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

(310) 204-2050

Daytime Phone #