2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M06000000936

1. Entity Name
W&M MIRACLE SPECIAL MANAGER L.L.C.



FILED
Apr 17, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

C/O WIEN & MALKIN STRATEGIC CAPITAL IV, LP 60 E. 42ND STREET NEW YORK, NY 10165 C/O WIEN & MALKIN STRATEGIC CAPITAL IV, LP 60 E. 42ND STREET NEW YORK, NY 10165



04122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 75-3208506 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVE. TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

| | e named entity submits this statement for the purpose of chartions of registered agent. | nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accep |
|---------------------------------------|---|--|
| SIGNATURE. | Signature, typed or printed name of registered agent and title it applicable. | (NOTE: Registered Agent signature (aquired when reinstating) DATE |
| F D | iling Fee is \$50.00 ue by May 1, 2007 | |
| 9. | MANAGING MEMBERS/MANAGERS | , |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM WIEN & MALKIN STRATEGIC CAPITAL IV L.P. 60 E. 42ND STREET NEW YORK, NY 10165 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| TITLE NAME STREET ADDRESS CITY-S1-ZIP | | DO NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | V00080713050 |
| TITLE NAME | | 04/26/07-80075-007 50.00 |

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE:

STREET ADDRESS

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

April 12,2007 (212)850-2690

Daytime Phone it