
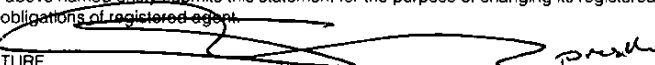
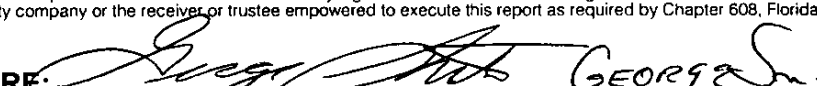


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

02-02-2006 90093 014 ****50.00

DOCUMENT # L04000002082 1. Entity Name PLAYERS OF MIAMI, LLC					
Principal Place of Business 30 NE 11TH ST MIAMI, FL			Mailing Address 6520 NW 77 CT MIAMI, FL 33166		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 30 NE 11th Street Suite, Apt. #, etc.			
City & State Zip		City & State Miami, FL Zip 33132		Country USA	
4. FEI Number 20-0590753				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SAVAGE, CRAIG D 801 NE 167TH ST #302 N MIAMI BEACH, FL 33162			7. Name and Address of New Registered Agent Name Steven R. Kozlowski Street Address (P.O. Box Number is Not Acceptable) Kozlowski Law Firm, P.A. 927 Lincoln Rd., #118 City Miami Beach FL Zip Code 33139		
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  (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Phazon Management Group, LLC 30 NE 11th Street Miami, FL 33132 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:  GEORGE SMITH Date 4-28-06 Daytime Phone #					

KOZLOWSKI LAW FIRM, P.A.
Contemporary Business Attorneys

ATTACHMENT
~~300000007~~
LO4000002082

Miami Beach || Key West

April 28, 2006

Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

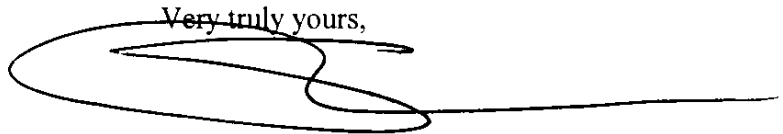
Re: *Players of Miami, LLC*
 Phazon Management Group, LLC

Dear Sir:

Enclosed please find the annual reports for Players of Miami, LLC and Phazon Management Group, LLC together with a check for \$100.00 for the filing costs.

Please feel free to call this office if you have any questions or concerns.

Very truly yours,



Steven Robert Kozlowski
Kozlowski Law Firm, P.A.