2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT			red 18, 2005 08:00 A	
1. Entity Nam	MENT # L00000002567 OAST VENTURE LLC		Secretary of State	
8823 SAN JO	ce of Business Mailing Address OSE BLVD, STE. 310 8823 SAN JOSE BLVD, STE. LE, FL 32217 JACKSONVILLE, FL 32217	310`		
E	OO NOT WRITE IN THIS SPA	ACE	02042005 No Chg-LLC CR2E083 (10/03) 4. FEI Number 59-3640457 Applied For Not Applicable 5. Certificate of Status Desired \$5.00 Additional Fee Required	
	6. Name and Address of Current Registered Agent			
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE., STE 3000 MIAMI, FL 33131			DO NOT WRITE IN THIS SPACE	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable (NOTE Registering Fee is \$50.00 tue by May 1, 2005	stered Agent signature required	d when reinstading) DATE	
9.	- MANAGING MEMBERS/MANAGERS			
IIILE NAME STREET ADDRESS CITY-ST-ZIP	MGR INTERNATIONAL MANAGEMENT COMPANY LLC 8823 SAN JOSE BLVD, STE. 310 JACKSONVILLE, FL 32217		U00000234775 02/18/05-80035-019 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			00.70700 00000 010 00.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TIYLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information supports with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and a create and that my signature shall have the same legal effect as if made under path; that I am a managing member or manager of the limited liability company or the receiver of trustee empowerful to execute this report as required by Chapter 608, Florida Statutes.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: SIGNATURE SIGNATURE AND TYPE OF DENTED NAME OF SIGNING MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE