2004 LIMITED LIABILITY COMPANY

Apr 29, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # L00000003661** 04-29-2004 90060 028 ****50.00 1. Entity Name **GREEN RIVER, LLC** Principal Place of Business Mailing Address **444 BRICKELL AVENUE** 444 BRICKELL AVENUE 210 SUITE 210 MIAMI, FL 33131 MIAMI, FL 33131 04192004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1078320 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ V., OSCAR DO NOT WRITE 444 BRICKELL AVENUE 210 IN THIS SPACE MIAMI, FL 33131 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_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. TITLE MGR RODRIGUEZ-VELASCO, OSCAR NAME STREET ADDRESS 444 BRICKELL AVENUE SUITE 210 CITY-ST-ZIP MIAMI, FL 33131 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1171 F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 11. I hereby certify that the information supplied with this filing 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 accordate 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 received my stee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAD MANAGING MEMBER, OF AUTHORIZED REPRESENTATIVE