2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # L00000005580 04-26-2004 90038 006 ****50.00 FJK MANAGEMENT, LLC Principal Place of Business Mailing Address 230 ROYAL PALM WAY 230 ROYAL PALM WAY PALM BEACH, FL 33480 PALM BEACH, FL 33480 02082004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 01-0656774 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KEITEL, FREDĚŘIČK J III DO NOT WRITE 230 ROYAL PALM WAY STE. 401 IN THIS SPACE PALM BEACH, FL 33480 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS a MGRM TITLE KEITEL, FREDERICK J III NAME STREET ADDRESS 230 ROYAL PALM WAY, STE. 401 CITY-ST-ZIP PALM BEACH, FL 33480 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE

I hereby certify that the information supplied 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 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.

NAME STREET ADDRESS CITY-ST-ZIP,

MEMBER, OF AUTHORIZED REPRESENTATIVE

FILED

Daytime Phone #