2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

May 03, 2005 8:00 am Secretary of State **DOCUMENT # L02000000378** 05-03-2005 90015 002 ****50.00 1. Entity Name ROYAL RIVER, LLC Mailing Address Principal Place of Business 2601 BISCAYNE BLVD. 2601 BISCAYNE BLVD. MIAMI, FL 33137 MIAMI, FL 33137 04282005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0575958 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ, ANTONIO DO NOT WRITE 2601 BISCAYNE BLVD. MIAMI, FL 33137 IN THIS SPACE 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, 2005 9. MANAGING MEMBERS/MANAGERS TITLE MGR MILLER, ROGER NAME STREET ADDRESS 2601 BISCAYNE BLVD CITY-ST-ZIP MIAMI, FL 33137 MGR TΠΙF GORDON, KENNETH NAME 2601 BISCAYNE BLVD STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33137 TITLE 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

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

FILED