2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Jan 10, 2005 08:00 AM DOCUMENT # L02000005991 Secretary of State 1. Entity Name ... PJUR GROUP MIAMI, LLC Principal Place of Business Mailing Address 227 1ST SIFEET 300 S PONTEUR, STE 604 SJTE3 MAM, FL 39139 MAM, FL 33139 01042005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0564977 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Bequired 5. Name and Address of Current Registered Agent MATAS, RAQUEL M DO NOT WRITE 201 SOUTH BISCAYNE BLVD., 34TH FLOOR MIAMI CENTER IN THIS SPACE MIAMI, FL 33131 3. 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 (NCTE: Registered Agent signature required when reinstating) Filing Fee is \$50:00 Due by May 1, 2005 MANACING MEMBERS/MANAGERS ₽. U00000176224 MGR TITLE 01/10/05-80082-023 HARRIS, RICHARD NAME 300 S. POINTE DR., STE. 604 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33139 MCR TITLE NAME PALMQUIST, JACK STREET ADDRESS 300 S. POINTE DR., STE. 604 MIAMI, FL 33139 CITY-ST-ZIP TITLE N.M. STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

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.

NAME STREET ADDRESS CITY-ST-ZIP