2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

- Mar 22, 2005 08:00 AM DOCUMENT # L02000012127 **Secretary of State** 1. Entity Name NIVCAB HOLDINGS LLC Principal Place of Business _ Mailing Address 3101 NORTH FEDERAL HIGHWAY 3101 NORTH FEDERAL HIGHWAY 7TH FLOOR 7TH FLOOR FT. LAUDERDALE, FL 33306 FT. LAUDERDALE, FL 33306 01142005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALHAMBRA REGISTERED AGENTS, INC. DO NOT WRITE 2 ALHAMBRA PLAZA, SUITE 1202 CORAL GABLES, FL 33134 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 DATE Signature, typed or printed name of registered agont and title if applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE VINCENT, STEPHEN A NAME STREET ADDRESS 101 N. FED. HWY STE 701 FORT LAUDERDALE, FL 33306 CITY-ST-ZIP TITLE NAME 03/22/05-80009-002 50.00 STREET ADDRESS CITY-ST-ZIP 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

11. 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.

SIGNATURE:

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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Daytime Phone #

FILED