2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 06, 2005 8:00 am
Secretary of State
09-06-2005 90045 026 ****50.00

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1. Entity Name
CHH INVESTORS, LLC

Principal Place of Business	Mailing Address
3250 MARY STREET STE. 500 MIAMI, FL 33133	3250 MARY STREET STE. 500 MIAMI, FL 33133

08042005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
1200 Brickell Avenue	SAME
Suite, Apt. #, etc.: Suite 1460	Suite, Apt. #, etc.
City & State: Miami, FL	City & State
Zip: 33131 Country: U.S.A.	Zip Country

4. FEI Number 48-1264443 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PELTZ, ARVIN 3250 MARY STREET STE. 500 MIAMI, FL 33133	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 September 7, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALIBHAI, KARIM 3250 MARY STREET #500 MIAMI, FL 33133 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1200 Brickell Avenue, Suite 1460 Miami, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: [signature] TOM BEZOL / CFO 8/12/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #