.≻2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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

Secretary of State 02-04-2004 90233 028 ****50.00 DOCUMENT # L02000013942 1. Entity Name VANES, L.L.C. Principal Place of Business Mailing Address 13720 SW 104TH AVE. 13720 SW 104TH AVE. MIAMI. FL 33176 MIAMI, FL 33176 01132004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-2290275 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent VANN, VINCENT R DO NOT WRITE 13720 SW 114 AVE MIAMI, FL 33176 IN THIS SPACE Surpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity arbmits this the obligations of registered a Manaver (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title il applicable. Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME VANN, VINCENT R 13720 SW 104 AVE STREET ADDRESS MIAMI, FL 33176 CITY-ST-ZIP MGR SPINEL TITLE ASBINEL PAULINO NAME STREET ADDRESS 12090 SW 100 ST MIAMI, FL 33176 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 TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

FILED Feb 04, 2004 8:00 am