2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

DOCUMENT # L02000015076 FILED JOHNSON, JOHNSON & ASSOC., LLC 05 APR 14 AM 10: 04 DEURETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 18301 NW 2ND COURT, SUITE 300 18301 NW 2ND COURT, SUITE 300 MIAMI, FL 33169 MIAMI, FL 33169 04112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 26-0056253 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JOHNSON INVESTMENTS GROUP, LLC DO NOT WRITE **18301 NW 2ND COURT** MIAMI, FL 33169 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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR 600052067886 04/26/05--01010--007 **310.00 TITLE JOHNSON, LEN NAME STREET ADDRESS 18301 NW 2 ND COURT CITY-ST-ZIP MIAMI, FL 33169 TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE 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 pr trustee empowered to execute this report as required by Chapter 608, Florida Statutes.