


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000025144 1. Entity Name AR HOLDINGS, L.L.C.	
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Principal Place of Business 1150 N.W. 72ND AVENUE, PH MIAMI, FL 33126	Mailing Address 1150 N.W. 72ND AVENUE, PH MIAMI, FL 33126
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DO NOT WRITE IN THIS SPACE

04172006 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 74-3063515	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BRODIE, SIDNEY Z 7270 N.W. 12TH STREET, PH-I MIAMI, FL 33126

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

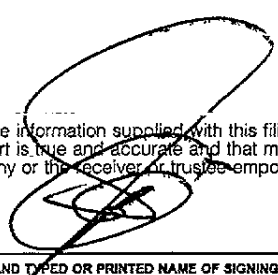
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	CAPO, ALEJANDRO
STREET ADDRESS	1150 N.W. 72ND AVENUE, PH
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	MGRM
NAME	REYES, RAFAEL
STREET ADDRESS	1150 N.W. 72ND AVENUE, PH
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

1100000533757
05/06/06-80135-021 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  _____

Date: 04/24/2006 Daytime Phone #: 305.573.0501

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