2005 LIMITED LIABILITY COMPANY

SIGNATURE:

SIGNATURE AND

FILED ANNUAL REPORT Apr 16, 2005 08:00 AM Secretary of State DOCUMENT # L02000026603 1. Entity Name GANINA, LLC Principal Place of Business Mailing Address 7229 NORTH MIAMI AVENUE 7229 NORTH MIAMI AVENUE MIAMI, FL 33150 MIAMI, FL 33150 Company of the compan 01222005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0646572 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DAYON, DANIEL DO NOT WRITE 7229 W MIAMI AVE MIAMI, FL 33150 IN THIS SPACE 8. The above named ntily submits this stallement 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 of registered agent and tile it applicable (NOTE Registered Agent signature required when reinstaling) DATE Filing Fee is \$50.00 Due by May 1, 2005 Unnnnn308745 04/16/05-80010-007 50.00 9. MANAGING MEMBERS/MANAGERS MGR TITLE NAME DAYAN, DANIEL SALOMON STREET ADDRESS 7229 NORTH MIAMI AVENUE MIAMI, FL 33150 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 pusped empowered to execute this report as required by Chapter 608, Florida Statutes.

IGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #