2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT FILED DOCUMENT # L03000006155 Jan 10, 2005 08:00 AM Secretary of State DJS ENTERPRISES LLC Principa iace of Business Mailing Address 8211 W. BROWARD BLVD., STE. 375 PÓ BOX 43 PLANTATION, FL 33324 BOCA RATON, FL 33429 01052005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 58-2673606 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KLISTON, TODD W DO NOT WRITE 8211 W. BROWARD BLVD., STE. 375 PLANTATION, FL 33324 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, typod or printed game 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 MGRM TITLE NAME NAIMI, M.H. U00000178047 01<u>/10</u>/05-80077-002 50.00 STREET ADDRESS 8211 W. BROWARD BLVD #375 CITY-ST-ZIP MGRM, FL 33324 TITLE NAME STREET ADDRESS 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.