2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 28, 2006 08:00 AM Secretary of State DOCUMENT # L03000021452 NIKKÍ BEACH PUBLISHING, LLC Principal Place of Business Mailing Address ONE OCEAN DR. ONE OCEAN DR. MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 07052006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 30-0193173 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE REGISTER, MICHAEL 1 OCEAN DRIVE MIAMI BEACH, FL 33139 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) Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$50.00 Due by September 6, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE PENROD, JACK NAME STREET ADDRESS ONE OCEAN DRIVE MIAMI BEACH, FL 33139 CITY-ST-ZIP H00000572621 TITLE 07/28/06-80007-013 150.00 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

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 eath; 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP

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

Daytime Phone #

FILED