FILED 2005 LIMITED LIABILITY COMPANY May 17, 2005 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L03000023720 1. Entity Name 05-17-2005 90119 025 ****50.00 GHS,LLC Principal Place of Business Mailing Address 552 NORTH ISLAND DRIVE 552 NORTH ISLAND DRIVE GOLDEN BEACH, FL 33160 GOLDEN BEACH, FL 33160 05102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 88-0374238 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Glan Singer SQ North FILM Du ROTH, ROUSSO & DARRACH, P.A. DO NOT WRITE 3440 HOLLYWOOD BOULEVARD SUITE 360 IN THIS SPACE GODE BL FC 33/60 HOLLYWOOD, FL 33021 8. The above named entity submits this statement or, the prose 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, 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 September 7, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM SINGER, GLENN H NAME STREET ADDRESS 552 NORTH ISLAND DRIVE CITY-ST-ZIP GÓLDEN BEACH, FL 33160 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-7IP 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 sharhave 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: \

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