2005 LIMITED LIABILITY

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

FILED ANNUAL REPORT Mar 31, 2005 08:00 AM DOCUMENT # L03000026834 **Secretary of State** 1. Entity Name RB-MILLER, LLC Principal Place of Business Mailing Address 9240 S.W. 72 ST., STÉ 118 9240 S.W. 72 ST., STE 118 MIAMI, FL 33173 MIAMI, FL 33173 03282005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0112007 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERNANDEZ-VALLE, MĀRIA DO NOT WRITE 10570 S.W. 27 ST., STE. 103 MIAMI, FL 33172 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. Signature, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TILE NAME BENITEZ, ROLÂNDO 9240 S.W. 72 ST., STE 100 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33173 TITLE U00000282740 03/31/05-80055-002 50.00 NAME STREET ADDRESS CATY-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 TOLE 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 SIGNATURE:

Daylime Phone #