2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE

FILED Mar 21, 2005 08:00 AM **DOCUMENT # L03000039928 Secretary of State** 1. Entity Name JAKÉ TWO, L.L.C. _ Principal Place of Business Mailing Address 1326 N. DIXIE HIGHWAY 1326 N. DIXIE HIGHWAY SUITE #9 SUITE #9 LAKE WORTH, FL 33460 LAKE WORTH, FL 33460 03152005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Ø Fae Required 6. Name and Address of Current Registered Agent WAGNER, DORIS R DO NOT WRITE 1326 N. DIXIE HIGHWAY SUITE #9 IN THIS SPACE LAKE WORTH, FL 33460 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, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 U00000272148 03/21/05-80078-003 500.00 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME WAGNER, DORIS R STREET ADDRESS 1326 N. DIXIE HIGHWAY, SUITE #9 CITY-ST-ZIP LAKE WORTH, FL 33460 TITLE NAME STREET ADDRESS CITY-ST-ZIP BRIE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE THE NAME STREET ADDRESS CITY-ST-ZIP DHE 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)(f), 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 of trustee empowered to execute this report as required by Chapter 609, Florida Statutes. -15-00

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #