


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 16, 2005 8:00 am
Secretary of State

01-27-2005 90079 007 ****50.00

DOCUMENT # L04000011870 1. Entity Name JANA DESIGN, LLC					
Principal Place of Business 1880 CENTURY PARK EAST, STE 1600 ATTN IRWIN RENNERT LOS ANGELES, CA 90067			Mailing Address 1880 CENTURY PARK EAST, STE 1600 ATTN IRWIN RENNERT LOS ANGELES, CA 90067		
2. Principal Place of Business 256 WORTH AVENUE Suite, Apt. #, etc. SUITE Q-R City & State PALM BEACH, FLORIDA Zip 33480			3. Mailing Address Suite, Apt. #, etc. City & State Zip		
4. FEI Number 01112005			Chg-LLC CR2E083 (10/03)		
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			Applied For <input checked="" type="checkbox"/> Not Applicable		
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 E PARK AVE TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 resigning) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to: Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER JANE BUFFETT 1880 CENTURY PARK, SUITE 1600 LOS ANGELES, CA 90067		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Irwin Rennert</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date: 1/11/05 <small>Daytime Phone #</small>		

* JANA DESIGN, LLC IS A SINGLE MEMBER LLC.