2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

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

Mar 01, 2006 08:00 AM **Secretary of State** DOCUMENT # L04000019921 1. Entity Name ESOJNI, L.L.C. Mailing Address Principal Place of Business 7133 CRESCENT CREEK LANE 7133 CRESCENT CREEK LANE COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073 02252006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEt Number 51-0524656 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE GONZALEZ, JOSE 7133 CRESCENT CREEK LANE COCONUT CREEK, FL 33073 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, typed or printed name of registered agent and title if applicable. (NOTE, Recistered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS MGRM me GONZALEZ, JOSE NAME 7133 CRESCENT CREEK LANE STREET ADDRESS COCONUT CREEK, FL 33073 UUU000451507 03/10/06-80056-010 **50.00** DITY-SI-ZIP CITCO NAME STREET ADDRESS CITY-ST-ZIP 717LE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-S7-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 tegal effect as it made under oath, that I am a managing member or manager of the limited fiability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

FILED

2-27-06

Daytime Phone &