2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# L04000029603

Entity Name: CORAL REEF GROUP, LLC

Current Principal Place of Business:

9737 N.W. 41ST STREET
SUITE 393
DORAL, FL 33178 US

New Principal Place of Business:

Current Mailing Address:

9737 N.W. 41ST STREET
SUITE 393
DORAL, FL 33178 US

New Mailing Address:

FEI Number: 84-1645064 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARRASCO, MIGUEL A
9737 N.W. 41ST STREET
SUITE 393
DORAL, FL 33178 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGRM	( ) Delete
Name:	JAREL, JOSE A	
Address:	9300 W. FLAGLER STREET SUITE 114	
City-St-Zip:	MIAMI, FL 33174 US	
Title:	MGRM	( ) Delete
Name:	COUTTS, SEAN M	
Address:	11172 SOUTH DIXIE HWY SUITE 453	
City-St-Zip:	CORAL GABLES, FL 33146 US	
Title:	MGRM	( ) Delete
Name:	CARRASCO, MIGUEL A	
Address:	9737 N.W. 41ST STREET SUITE 393	
City-St-Zip:	DORAL, FL 33178 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: MIGUEL A CARRASCO MGRM 04/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date