

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069507

FILED
Aug 15, 2005
Secretary of State

Entity Name: PRIB LLC

Current Principal Place of Business:

2400 EAST LAS OLAS BOULEVARD
SUITE 368
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

2400 EAST LAS OLAS BOULEVARD
SUITE 368
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

WOOD, DALE S
2400 EAST LAS OLAS BLVD
SUITE 368
FORT LAUDERDALE, FL 33301 US

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: DALE WOOD

08/15/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OSL, EUGENE A
Address: 2400 EAST LAS OLAS BOULEVARD, SUITE 368
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: WOOD, DALE S
Address: 2400 EAST LAS OLAS BLVD, SUITE 368
City-St-Zip: FORT LAUDERDALE, FL 33301

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: DALE WOOD

MGR

08/15/2005

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