2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# L04000069711

Entity Name: METZGER FAMILY HOLDINGS, LLC

Current Principal Place of Business:

P.O. BOX 811105
BOCA RATON, FL 334811105

New Principal Place of Business:

2102 NW 5TH STREET
BOCA RATON, FL 33486

Current Mailing Address:

P.O. BOX 811105
BOCA RATON, FL 334811105

New Mailing Address:

2102 NW 5TH STREET
BOCA RATON, FL 33486

FEI Number: 20-1661415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: MGR ( ) Delete
Name: METZGER, CHARLES
Address: P.O. BOX 811105
City-St-Zip: BOCA RATON, FL 334811105

Title: MGR ( ) Delete
Name: METZGER, PATRICIA
Address: P.O. BOX 811105
City-St-Zip: BOCA RATON, FL 334811105

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: METZGER, CHARLES
Address: 2102 NW 5TH STREET
City-St-Zip: BOCA RATON, FL 33486

Title: MGR (X) Change ( ) Addition
Name: METZGER, PATRICIA
Address: 2102 NW 5TH STREET
City-St-Zip: BOCA RATON, FL 33486

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: CHARLES METZGER MGR 04/28/2005

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