

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000041709

FILED
May 14, 2007
Secretary of State

Entity Name: NIFE 2006, L.L.C.

Current Principal Place of Business:

1001 BRICKELL BAY DRIVE, STE. 1400
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1001 BRICKELL BAY DRIVE, STE. 1400
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-8215693 FEI Number Applied For () FEI Number Not Applicable () 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:

ROSEN, BORIS
1001 BRICKELL BAY DRIVE, STE. 1400
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

ROSEN, BORIS
1001 BRICKELL BAY DRIVE, STE. 1400
SUITE 1400
MIAMI, FL 33131 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:

05/14/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MULLER, FRANK H
Address: 1001 BRICKELL BAY DRIVE, STE. 1400
City-St-Zip: MIAMI, FL 33131

Title: MGR () Delete
Name: RICK DE MULLER, BRIGITTE J
Address: 1001 BRICKELL BAY DRIVE, STE. 1400
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, 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: FRANK H MULLER

MGR

05/14/2007

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