2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 23, 2005 08:00 AM Secretary of State **DOCUMENT # L97000000327** 1. Entity Name NISHANN, L.C. Mailing Address Principal Place of Business 608 FIFTH AVE., SUITE 807 24 ISLAND DRIVE NEW YORK, NY 10020 NORTH KEY LARGO, FL 33037 CR2E083 (10/03) 04012005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3940765 Not Applicat \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARDIN, DAVID C DO NOT WRITE 500 EAST BROWARD BLVD. IN THIS SPACE **SUITE 1950** FT. LAUDERDALE, FL 33394 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS TITLE MGR VARTANIAN, NISHAN NAME STREET ADDRESS 24 ISLAND DRIVE NORTH KEY LARGO, FL 33037 CITY-ST-ZIP TITLE U00000326124 04/23/05-80044-007 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Vaul Vayhance

STREET ADDRESS CITY-ST-ZIP

4-8-05