2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 17, 2005 08:00 AM **DOCUMENT # L97000000597 Secretary of State** 1. Entity Name BLUE J. LIMITED COMPANY Mailing Address Principal Place of Business 2250 SW 3RD AVENUE 2250 SW 3RD AVENUE SUITE 303 SUITE 303 MIAMI, FL 33129 MIAMI, FL 33129 02112005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0815529 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent VALDES, MARLENE DO NOT WRITE 2250 SW 3RD AVENUE SUITE 303 IN THIS SPACE MIAMI, FL 33129 5. 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 reinstaling) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGP TITLE VALDES, MARLENE NAME STREET ADDRESS 2250 SW 3RD AVENUE, SUITE 303 MIAMI, FL 33129 CITY-ST-ZIP 706732000000 TITLE 03/17/05-80065-004 50.00 NAME STREET ADDRESS CITY-ST-712 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZP

2/14/05