2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE: Donald.E. Lefton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE

Secretary of State 02-04-2005 90103 013 ****50.00 DOCUMENT # L9700001202-1. Entity Name CP MIAMI HOLDINGS, L.L.C. Principal Place of Business Mailing Address 3250 MARY STREET 3250 MARY STREET SUITE 500 SUITE 500 20007736 MIAMI, FL 33133 MIAMI, FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For 65-0791980 Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PELTZ, ARVIN ESQ. 3250 MARY STREET SUITE 500 MIAMI, FL 33133 Street Address (P.O. Box Number is Not Acceptable) City Zip Code 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. minutes and secure of the contribution of the THE PROPERTY OF THE STATE OF TH SIGNATURE Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) CATE SET TO DATE OF CALL Filing Fee Is \$50.00 Due by May 1,2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE TITLE □ Defete ☐ Change ☐ Addition ARISON, MICKEY NAME NAME STREET ADDRESS 3655 N.W. 87TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-ZIP MGR ☐ Delete TITLE ☐ Change ■ Addition FRANK, HOWARD NAME NAME STREET ADDRESS 3655 N.W. 87TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-ZIP MGR ☐ Delete TITLE TITLE ☐ Addition LEFTON, DONALD NAME ._ STREET ADDRESS 3250 MAIN STREET, 5TH FLOOR 3250 MARY STREET SUITE 500 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 CITY-ST-ZIP TITLE MGR Delete TITLE ☐ Addition WEISER, SHERWOOD NAME NAME STREET ADDRESS 3250 MAIN STREET, 5TH FLOOR STREET ADDRESS 3250 MARY STREET SUITE 500 MIAMI, FL 33133 COTY-ST-7IP CITY-ST-ZIP MGR TITLE ☐ Delete TITLE Change ☐ Addition TEMLING, W. PETER NAME NAME 3250 MARY STREET SUITE 500 STREET ADDRESS 3250 MAIN STREET, 5TH FLOOR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33133 CITY-ST-7IP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS -STREET ADDRESS A STANKE TO ME TO BE CITY-ST-ZIP 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 shell-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.

FILED Feb 04, 2005 8:00 am

02/01/2005 --

305-445-2493

Daytime Phone #