. 2006 LIMITED LIABILITY COMPANY

Apr 28, 2006 08:00 Al Secretary of State **ANNUAL REPORT** DOCUMENT # L98000002204 1. Entity Name HEP-1-MIR, L.C. Principal Place of Business Mailing Address C/O PAMG-RE LAW DEPARTMENT C/O PAMG-RE LAW DEPARTMENT 8 CAMPUS DRIVE, 4TH FL, ARBOR CIR S 8 CAMPUS DRIVE, 4TH FL, ARBOR CIR S PARSIPPANY, NJ 07054-4493 PARSIPPANY, NJ 07054-4493 02062006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 65-0876174 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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, 2006 9. MANAGING MEMBERS/MANAGERS TITLE MEM THE PRUDENTIAL INSURANCE CO OF AMERICA NAME 8 CAMPUS DRIVE, 4TH FLOOR STREET ADDRESS PARSIPPANY, NJ 07054 CITY-ST-ZIF TITLE U00000544912 05/11/06-80055-005 50.00 NAME STREET ADDRESS CHY-ST-ZIP ITTLE NAME STREET ADDRESS DO NOT WRITE City-St-Zip IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

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

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY ST-ZIP

SIGNATURE: