2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jan 12, 2004 08:00 AM --Secretary of State DOCUMENT # L99000003312 NAZARI ASSOCIATES III, LLC Principal Place of Business Mailing Address 3500 N. 55TH AVENUE 3500 N. 55TH AVENUE HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 01062004No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0963190 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent SARAGOVIA, EFRAIM DO NOT WRITE 3500 N. 55TH AVE. HOLLYWOOD, FL 33021 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: Rog stered Agent signature required when reinstating) CATE Filing Fee is \$50.00 Due by May 1, 2004 9. MANAGING MEMBERS/MANAGERS MCRM TITLE SARAGOVIA, EFRAIM NAME STREET ADDRESS 3500 N. 55TH AVENUE CITY-ST-ZP HOLLYWOOD, FL 33021 U000000002010 01/12/04-80034-004 50.00 TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IIILE IN THIS SPACE STREET ADDRESS CHY-ST-ZP TITLE NAME STREET ADDRESS

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 it made under oath; that I am a managing member or manager of the limited flability company or the receiver or limited empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURE:

CHY-ST-ZIP

THE

NAME

STREET ADDRESS

CHY-ST-ZIP

RIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGEST BEINDER, OR AUTHORIZED REPRESENTATIVE

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