2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 28, 2005 08:00 AM DOCUMENT # L99000003312 **Secretary of State** 1. Entity Name NAZARI ASSOCIATES III, LLC Principal Place of Business Mailing Address 3500 N. 55TH AVENUE 3500 N. 55TH AVENUE HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 01182005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0963190 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 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: Registered Agent signature required when remetating) DATE Filing Pee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS MGRM TITLE SARAGOVIA, EFRAIM NAME STREET ADDRESS 3500 N. 55TH AVENUE CITY-ST-ZIP HOLLYWOOD, FL 33021 1100000278405 03/28/05-80023-025 50.00 TITLE 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 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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 of manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPEDOR PRINTED NAME OF IGNING HARAGING MEMBER OR AUTHORIZED REPRESENTATIVE 105 Daytime Phone #